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| logo | REGISTRAR'S OFFICEGRADUATE STUDENT EXMATRICULATION FORM | **Document No:** FR.OIO.021 **Release Date:** 20.07.2023**Revision No:** 00**Revision Date:** |

TO THE REGISTRAR'S OFFICE

|  |  |
| --- | --- |
| Name and surname |  |
| Student number |  |
| T.R. ID Number |  |
| Faculty/Directorate |  |
| Department/Program |  |
| Registration Date |  |
| Grade |  |
| Date of Graduation |  |
| Date of exmatriculation |  |

 (Student name, surname, signature)

The student whose identity is written above is not related to our unit.

|  |  |  |  |
| --- | --- | --- | --- |
| UNITS | NAME SURNAME/SIGNATURE | DATE | DESCRIPTION |
| Career planning center (1) |  |  |  |
| IT Office (2) |  |  |  |
| Library and documentation office (3) |  |  |  |
| Financial Affairs Office (4) |  |  |  |
| Head of Department/Program (5) |  |  |  |
| Deanery/Vocational school principal (6) |  |  |  |

Director of Registrar's Office (7)

Signature

* Signature transactions must be made according to the number next to the Units.