Öğrenci:

* Ders aldığı kurumun resmi transkriptini ekler.
* Bütün belgeleri Fakülte/Meslek yüksekokul/Konservatuvar Sekreterliği’ne teslim eder.

Tarih: …/…/20…

…………………………………..Fakültesi Dekanlığı’na

…………………………………. Meslek Yüksekokul Müdürlüğü’ne

…………………………………..Konservatuvar Müdürlüğü’ne

…………………………………………………………………………Fakültesi/Meslekyüksekokulu/Konservatuvar ……………………………………………………………Bölümü ………………………….numaralı öğrencisiyim. 20…/20…öğretim yılı Güz / Bahar / Yaz döneminde ……………………………………………………Üniversitesi …………………………………………………………………………..Fakülte/Meslek yüksekokulu/Konservatuvar …………………………………………………….. Bölümünden aldığım ve ekli transkriptte listelenen derslerin intibakının yapılmasını talep ediyorum.

Gereğini saygılarımla arz ederim.

|  |  |
| --- | --- |
| E-posta: | Ad Soyad: |
| Tel: | İmza: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Geldiği Üniversitede Alınan Dersler** | | | | **Fakültemizde İntibak Edilecek Dersler** | | |
| **Sıra** | **Dersin Kodu Adı** | **AKTS** | **Not** | **Dersin Kodu Adı** | **AKTS** | **Not** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | Toplam |  |  |  |  |  |

Ek: Transkript (öğrenci tarafından eklenecektir)

Student :

* Official transcript should be added.
* All documents should be delivered to the …………………………………. faculty secretary
* All documents should be delivered to the …………………………………..vocational school secretary
* All documents should be delivered to the ………………………………… conservatory secretary

Date: …/…/20…

…………………………………..to Faculty Deanary ;

…………………………………. to Vocational School Directorate ;

…………………………………..to Concervatory Directorate ;

I am the student of ……………………………………………………………………Faculty/Vocational School/ Concervatory………………………………………………..Department with ……………………. student number..

I request the adjustment of the list of attached courses in that I took from …………………………………………..University,…………………………………………… faculty/vocational school/concervatory of ………………………………..in 20…./20…. Academic year , in Fall / Spring / summer semester

I kindly request appropriate action

|  |  |
| --- | --- |
| E-mail: | Name surname: |
| Tel: | Signature: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **The courses that you took from the university you came**  **from** | | | | **Courses that wil be adjusted in our faculty/vocational school/concervatory** | | |
| **Sıra** | **Code of the course** | **ECTS** | **Grade** | **Code of the course** | **ECTS** | **Grade** |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
|  | Total |  |  |  |  |  |

Addition:Transcript (should be added by the student)