



**COURSE WITHDRAWAL FORM**

**03**

|                               |                                      |               |
|-------------------------------|--------------------------------------|---------------|
| Student Name & Surname: _____ |                                      |               |
| Student No: _____             | Department: _____                    |               |
| Course Code: _____            | Academic Semester: 20__ / 20__ _____ |               |
| Course Title: _____           |                                      |               |
| Reason For Withdraw: _____    | Signature/Approval                   | Date          |
| Lecturer's Name: _____        | _____                                | __ / __ /20__ |
| Advisor's Name: _____         | _____                                | __ / __ /20__ |
| Registrar's Name: _____       | _____                                | __ / __ /20__ |

\*ATTENTION: Students cannot withdraw from a repeated course.  
 Students can not withdraw from more than 2 courses in a semester.  
 If Students withdraw a course, Loose their OSYM scholarship

**ZerinGÜRLER**  
 Head of Admission and Registration



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