**FACULTY OF ENGINEERING AND NATURAL SCIENCES**

**EXAM OVERLAP DECLARATION**

…… / …… / 2021

# Due to the exam conflict, I cannot take the exam for your ………… course. I hereby submit for your information that I will take the exam for my undergraduate / major …………… course on the specified date and time.

...............................................

 (Student Full Name, Signature)

Student's Full Name :

Student Number:

Department:

Date of Conflicting Exams: ...… / ...… / 2021

Hours of Conflicting Exams: ……… /…………

Mobile Number:

E-mail:…………………………………………………………………… ……………………………………

 **NOTE: After this petition is filled, it must be sent via stix to the lecturer who cannot take the exam before the exam.**

ÜÜ.FR.038 Revizyon No: 1 (24.08.2020)