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|  | **T.R.**  **USKUDAR UNIVERSITY**  **INSTITUTE OF NATURAL SCIENCES** |  |

**PETITION APPLICATION FOR COURSES TO BE COUNT TAKEN FROM ANOTHER HIGHER EDUCATION INSTITUTIONS**



**TO THE DEPARTMENT OF THE DEPARTMENT OF ............................................................................**

I am a thesis/non-thesis master program student of your department with number .................  
I respectfully pay homage to the need to count the courses I have received at another Higher Education Institution and which I have succeeded in, the following period, semester, code, name, credit and grade to my Graduate Program.

DD / MM / 202Y

(Student First Name, Last Name, Signature)

**Phone:** ………………………………..........................………………………………................................

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

**COURSES TO BE COUNTED**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Course learned from the Master's Program ..................................... from the University of ........................................** | | | | | **Uskudar University Health Sciences ……………………………………. Master's Program for the exemption of the Course** | | | | |
| **Course**  **Code** | **Course Name** | **Credit** | **ECTS** | **Success**  **Grade** | **Course**  **Code** | **Course Name** | **Credit** | **ECTS** | **Success**  **Grade** |
|  |  |  |  |  |  |  |  |  |  |
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**Add.: Transcript**

**Course Contents**

**TO THE DIRECTORATE OF THE INSTITUTE OF NATURAL SCIENCES**

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| --- | --- | --- | --- | --- | --- |
| Number | : |  | Date | : | DD / MM / 202Y |

It is deemed appropriate to count the courses that the above-mentioned student passed successfully in another Higher Education Institution to the graduate program courses / courses specified in the table.

I supply to your kind requirement.

…………………………………….

**Head of the Department**

(Title, First Name, Last Name, Sig.)