**SINGLE COURSE EXAMINATION FORM**



|  |  |
| --- | --- |
| **Student:** |  |
| Name Surname : |   | Class/Year | :  |
| Student Number : |   | Phone  | :  |
| Faculty : |   | E-mail | :  |
| Department : |   | Date | :  |

**TO THE FACULTY OF HUMANITIES AND SOCIAL SCIENCES**

I am a student of the faculty with the identification given above.

In order to graduate at the end of the 2024-2025 Academic Year Spring Semester, I want to take a single course examination from the course I have listed below.

I respectfully submit for your information.

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(Student Signature)

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| --- | --- | --- |
| **COURSE CODE** | **COURSE NAME** | **COURSE INSTRUCTOR** |
|  |  |  |

ÜÜ.FR.034 Revizyon No: 0 (08.11.2016)