**ANTALYA BİLİM**

**ÜNİVERSİTESİ**

**ANTALYA BİLİM ÜNİVERSİTESİ REKTÖRLÜĞÜ**

**……………….……………….. Dekanlığına**

*To the Dean of the College of ………………………..*

Tarih/*Date* : …../…../…..

201..../ 201…. eğitim – öğretim yılı güz / bahar döneminde aşağıda belirtilen dersten çekilmek istiyorum.

*I would like to withdraw form the below-mentioned course in 201..../201…. Academic Year-Fall / Spring Semester.*

Adı Soyadı / *Name Lastname*

İmzası / *Signature*

**Öğrencinin /** *Student’s*

Öğrenci No / *Student Number* **:………………………………..………………………………...…….**

TC Kimlik No / *TR.ID Number* **:………………………………..……………………………………….**

Fakülte / *Faculty* **:…………………………………..…………………………………….**

Bölüm ve Sınıf / *Department and Class* **:……………………………………..………………………………….**

E-posta / *E-mail* **:……………………………………..………………………………….**

Telefon / *Phone* **:………………………………………..……………………………….**

|  |  |  |
| --- | --- | --- |
| **ÇEKİLMEK İSTENİLEN DERS** / *COURSE TO BE DROPPED* | | |
| **KODU** / *CODE* | **ADI** / *NAME* | **AKTS** / *ECTS* |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **ONAY** / *APPROVAL* | |
| **Bölüm Başkanı** *Department Head* | **Öğrencinin Danışmanı**  *Student Advisor* |
| **İmza** / *Signature* : | **İmza** / *Signature* : |

Form : Dersten Çekilme Formu

*Course Withdrawal Form*