

## GRADUATION EXAM REQUEST

To: Dean's Office, Faculty of Economics and Administrative Sciences, Munzur University

I am a student of your Faculty, Department of ....., student number ..... Due to the graduation requirements of the ...../..... Academic Year ..... semester, I request to take the graduation exam(s) for the course(s) listed below, in accordance with Article 27 of the Munzur University Associate and Undergraduate Education Regulation.

Name – Surname:

Signature:

Date:

### COURSE LIST

Course Code | Course Title | Instructor

...

...

...

Phone:

E-mail:

Department Chair Approval: Signature:

Note: I accept that my exam will be considered invalid if the information I provided is found to be incorrect.