

REPUBLIC OF TÜRKİYE FIRAT UNIVERSITY

Leave of Absence Application Form

FACULTY OF HUMANITIES AND SOCIAL SCIENCES

Department of History

I am a student in your department with the registration number, currently enrolled in the grade. In accordance with the relevant articles of our University's Education-Teaching and Examination Regulations, I kindly request a leave of absence due to the reason stated below. I respectfully submit this request for your consideration.	
	//202
	Signature
	Student Name and Surname
Address	
Phone	
E-Mail	
Academic Year for Requested Leave	20 20
Requested Semester(s) for Leave	Fall Semester □ Spring Semester □
Reason for Leave	
Attachments:	