EXCUSED-ABSENCE EXAM APPLICATION FORM

KTU ……/…./202..

OF FACULTY OF TECHNOLOGY

TO THE HEAD OF THE DEPARTMENT OF ELECTRONICS AND COMMUNICATION ENGINEERING

I am a student of your department. Due to the reason stated below, I could not take the midterm exam of some course(s) at the date and time in the schedule.

I request that I be granted an excused-absence exam for the course(s) I have specified.

Student Information **Signature**

Name Surname		Number	
Type of Study	Regular Program ( )	Evening Program ( )	
Academic Year			
Semester	Fall Semester ( )	Spring Semester ( )	
Contact Information			

Attachments	**1. Transcript**	
	2. Excuse Document	( ) Health problem ( ) On duty/on leave ( ) Late registration ( ) More than 2 exams/day ( ) Exam clash ( ) Other

Evaluation by the Head of Department

( ) The student has been deemed eligible to take the excused-absence exam.

( ) The student has not been deemed eligible to take the excused-absence exam.

Reason for ineligibility

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Assoc. Prof. Dr. Canan AKSOY
Head of Department

Courses for which an excused-absence exam is requested

Code	Course Name	Exam Date	Course Instructor

Unofficial English translation. In case of any discrepancy, the Turkish original prevails.