

T.C.
KARADENİZ TECHNICAL UNIVERSITY
DEPARTMENT OF FOREIGN LANGUAGES
HEAD OF FOREIGN LANGUAGES DEPARTMENT

I am a student in KTU Department of
with student ID no. and name

I would like to take Undergraduate Students of the 1st Year Proficiency Exam
which will be made at the beginning of academic year 20.. / 20.. and on the
date for the departments without English Preparatory Class.

Submitted to your information

..... / / 20....

Signature :

Name/Surname :

Contact Information:

Adress:

Mobile Number:

E-Mail: