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| **ou_logo(a)** | **APPLICATIONS FOR WITHDRAWAL FROM UNIVERSITY** | **FORM\_OH\_320\_03\_01**  **VERSION 1** |

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| --- | --- | --- | --- | --- | --- | --- |
| I want to withdraw from university. Please see my reason below. | | | | | | |
| Student Number |  | | | | | |
| Name Surname |  | | | | | |
| Faculty / School / Institute |  | | | | | |
| Program |  | | | | | |
| Level | English Preparatory | Undergraduate | Scientific Preparatory | | Master’s | Doctorate |
| Mobile Phone Number |  | | | | | |
| Other Phone Number |  | | | | | |
| E-mail Address  (Other than OzU Address) |  | | | | | |
| Signature |  | | | Date (day/month/year) ……..… /…. ……../………. | | |

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| **REASON FOR WITHDRAWAL** | | | |
| Please indicate your reason for withdrawal by marking **(X)** the relevant box. You can mark more than one box. | | | |
|  | Academic Failure |  | Completing the maximum period of study |
|  | Change in Residency |  | Military Service |
|  | Dissatisfaction |  | Transportation |
|  | Education Abroad |  | Preparing for University Entrance Exams |
|  | Family Related |  | Work Related |
|  | Financial |  | Health Issues |
|  | Lateral Transfer (Other Institutions)  (Please indicate the University) |  | |
|  | Placement to a Turkish Medium Program  (Please indicate the University) |  | |
|  | Registration to Another University  (Please indicate the University) |  | |
|  | Other  (Please indicate the reason) |  | |

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| **ADVISOR INFORMATION** | | |
| Name Surname |  | |
| Opion |  | |
| Signature |  | Date (day/month/year) ……..… /…. ……../………. |

|  |  |  |
| --- | --- | --- |
| **Student Services Staff** | | |
| Name Surname |  | |
| Signature |  | Date (day/month/year) ……..… /…. ……../………. |