

STUDENT INFORMATION

NAME SURNAME:

STUDENT NUMBER:

CELL PHONE: (0)

E-MAIL:

FACULTY / VOCATIONAL / INSTUTE:

DEPARTMENT / PROGRAM:

ADDRESS:

DATE
SIGNATURE

	DEPARTMENT	EXPLANATION	NAME SURNAME	DATE	SIGNATURE
1	CAREER CENTER	APPROVAL			
2	LIBRARY	APPROVAL			
3	INFORMATION SYSTEMS AND TECHNOLOGY DIRECTORATE (BST)	APPROVAL			
4	STUDENT ACCOUNTING OFFICE	APPROVAL			
5	REGISTAR'S OFFICE (ÖKİD)	APPROVAL			

NOTE: Student card and copy of ID card must delivered with this form.

The application for deregistration is made by OKİD in person or by notary public power of attorney.