**T.R. NISANTASI UNIVERSITY MULTI-PURPOSE PETITION**

 **…./…../20…**

**TO THE DEAN OF THE FACULTY OF / TO THE DIRECTORATE OF THE SCHOOL OF / VOCATIONAL SCHOOL OF …..……………………………………..**

REQUEST;.............................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................

Kindly submitted for necessary action.

**Student’s Name/Surname :** ..........................................................................................................................................

**Department:** ....................................................................................................................

**Grade:** ............................................

**Student Number :** ...................................................... **T.R. Identity Number** : .................................................................

**Phone:** ..............................................................**E-mail :** ......................................................................................

**IBAN :** (For refund requests.)..................................................................................................................................

**ACCOUNT HOLDER’S NAME AND SURNAME**.............................................................................................................................

**Student’s Signature**

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**UNIT’S NOTE (NOT FOR STUDENTS) THE DEAN OF STUDENTS’ NOTE (NOT FOR STUDENTS)**