

Form 7: Make-up Exam Application Form



T.C.
HALIÇ UNIVERSITY
FACULTY OF BUSINESS ADMINISTRATION

ID No. : _____	Department : _____
Name Surname : _____	Phone No. : _____
E-mail : _____	Date : _____

ATTACHMENTS: Excuse Document (The relevant document should be submitted within three business days including the day of the beginning of the excuse).

*Excuses that are not submitted within the specified time will not be accepted.

Reason for the Excuse

- () Health () Military Duty () Time Conflict
() More than three exams within a day
() Other : _____

Courses that Require Make-up Exam			
Course Code	Course Name	Course Instructor	Exam Date

I request make-up exam(s) for the course/courses listed above.

I hereby declare that I know that if the provided information is incomplete, inaccurate, and another exam was taken within the specified date, my application will be deemed invalid and disciplinary and other legal actions will be taken.

STUDENT SIGNATURE