TO T.C.
BEYKOZ ÜNİVERSİTESİ

…… Rectorate / Faculty / VSO Directorate,

(Please write the appropriate one of the relevant authorities in the space above.)

GRADE OBJECTION PETITION

..... /..... / ……

In the …… .. / …… academic year …… .. (Fall / Spring / Summer) semester, the following lesson …… .. …… (Midterm / Make-up Exam / Final Exam / Repeat Exam etc.) I want the exam grade to be re-evaluated.

Kindly submitted for the necessary action.

Code and Name of Course : ……..

Instructor of the Course : ……..

Description:

Student's;
Student number: ……

First Name: ……

Surname: ……

Program: ……

Telephone: ……....

Signature: ……

Form No	Revizyon Tarihi	Revizyon No	Basım Tarihi	Sayfa
GS.OIM.F.01	26.05.2017	001	29.04.2020 **	1/1

Bu dokümanın güncelliği sadece **"BASIM TARİHİNDE"** geçerlidir.
** ***GÜNCEL DOKÜMAN İÇİN AĞA BAKINIZ*** **