**TO T.C.**

**BEYKOZ UNIVERSITY**

**Graduate Programs Institute Directorate,**

**SUSPENSION OF STUDIES APPLICATION FORM**

 ……/……/……

**Student’s,**

|  |  |
| --- | --- |
| Name Surname |  |
| Student Number |  |
| Program |  |
| Phone Number |  |
| Address |  |
| Academic Year for Suspension of Studies |  |
| Semester for Suspension of Studies**(Tick the relevant box)** | Fall Spring | Fall + Spring |

I kindly request to suspend my studies due to the excuse I stated below.

Kindly submitted for necessary action.

##  Signature

**............................**

**Excuse to Suspend Studies:**

 Health Problems

 Military Service

 Financial and Private Reasons

 Other Excuses…………………………………………………………………

*Important Note: In accordance with the relevant regulations you must submit official additional documents related to your reason as a complimentary of your suspension request.*