İSTANBUL GELİŞİM ÜNİVERSİTESİ

Date **.....**/**.....**/2022

T.C.
İSTANBUL GELİŞİM UNIVERSITY
TO THE DIRECTORATE OF STUDENT AFFAIRS

I hereby give explicit consent that İstanbul Gelişim University completes my enrollment in the double major program of …….. of the Faculty/Vocational School of ……

Kindly request you to do the needful.

Name:

Surname:

I.D. No:

Phone No:

Signature:

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