## ATILIM UNIVERSITY GRADUATE SCHOOL OF NATURAL AND APPLIED SCIENCES APPLICATION FORM FOR TAKING COURSE(S) FROM UNDERGRADUATE PROGRAMME Sent to : Directorate of Graduate School Sent by Name-Surname: Post-Graduate Student No: M.Sc. (without thesis) Date of Starting the Programme; Academic Year: Semester: : ...... Semester: ..... Last Registered; Academic Year Required Course(s) Type of the Code Name Credit Year Semester Course Official Undergraduate and M.Sc. Transcripts shall be added to the form. The student may select undergraduate courses with approval of the chair of the concerned EABD provided that maximum two courses of master programmes have not been taken during undergraduate programme. The chair of graduate school department may delegate his/her powers to the advisor. The student may select undergraduate courses with approval of the chair of the concerned EABD provided that they have not been taken during undergraduate programme. The chair of graduate school department may delegate his/her powers to the advisor. However, maximum three of such courses can be counted for course load and master programme credits. A student who is taking undergraduate courses shall be enrolled in the XXX 580 "Special Studies I (Non-credit)" course if it is his/her first undergraduate course, s/he shall be enrolled in the XXX 581 "Special Studies II (Non-credit)" course if it is his/her second undergraduate course and s/he shall be enrolled in the XXX 582 "Special Studies III (Non-credit)" course if it is his/her third undergraduate course. Name and Surname of Student's Advisor: ..... It is seen in the added transcript that the student has/has not taken the course/courses stated above during his/her undergraduate education. When the M.Sc. transcript is reviewed, it is confirmed that during the M.Sc. with //without // thesis programme the student has taken ....... (numbers of courses) courses/no courses from the undergraduate programme and above-mentioned student's application to this/these course/courses and these courses' being included in the Cumulative Grade Point Average (CGPA) of the student. Approved Not Approved Signature (Student Advisor): Name and Surname of Thesis/Dissertation Supervisor: Remarks Ground for Objection Remarks of the Head of Department: Approved Not Approved Ground for Objection • Date Head of Department Opinion of the DI : Approved \( \square\) Not Approved \( \square\) Ground for Objection • Date Head of DI DI Document No: \_ Appendix: \_ Sent by: Graduate School of Natural and Applied Sciences GSS Document Number: Sent to: Directorate of Registrar's Office Director of Graduate School Date

Three copies shall be filled in.