

ATILIM UNIVERSITY
GRADUATE SCHOOL OF NATURAL AND APPLIED SCIENCES
APPLICATION FORM FOR TAKING UNDERGRADUATE COURSE

Sent to : Directorate of Graduate School

Sent by : Department of Graduate School

Name/Surname : Graduate Student ID:

Registered Program: Master's (thesis) Master's (non-thesis)

Year of Starting : Semester:

Current Academic Year : Semester:

Course						
Code	Name	Credit	ECTS	Year	Semester	Type (Elective/Compulsory)

- The student may select undergraduate courses with approval of the chair of the concerned department provided that maximum two courses of master programs have not been taken during undergraduate program. 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 department provided that they have not been taken during undergraduate program. 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 program credits.
- **Undergraduate and master's transcripts must be submitted along with the approved form.**

Name/Surname of Advisor :

Students undergraduate and master's transcript has been reviewed

It is seen in the added transcript that the student has/has not taken the course/courses stated above during his/her undergraduate education. It is confirmed that during the thesis /non-thesis master's program, the student has taken (numbers of courses) courses/no courses from the undergraduate program 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

Advisor's Signature :

Name/Surname of Thesis Advisor :

Remarks : Approved Not Approved Thesis Advisor's Signature:
 Ground for Disqualification :

The course will be taken from Department of

Remarks of the Department : Approved Not Approved
 Ground for Disqualification :

_____ Date

_____ Chairperson

Remarks of the Department : Approved Not Approved
 Ground for Disqualification :

_____ Date

_____ Head of Department

Dep. Document No: _____ Appendix: _____

This form shall be filled in two copies. A copy of the registered form will be submitted to advisor for the approval of course registration, after the form is approved by the chair of the department.