



T.R.
HALIÇ UNIVERSITY
COURSE ADD/DROP FORM

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I- STUDENT INFORMATION

Date:/...../20....

Full Name		Student Signature	
Student Number			
Department			
Program	<input type="checkbox"/> Master's Program with Thesis <input type="checkbox"/> Non-Thesis Master's Program	<input type="checkbox"/> PhD/Proficiency in Arts	

I hereby request the addition and/or withdrawal of the courses listed below for the Fall/Spring Semester of the Academic Year 202...-202...

II- COURSES TO BE ADDED

No	Code of The Course	Title of the Course	Instructor of The Course

III- COURSES TO BE DROPPED

No	Code of The Course	Title of the Course	Instructor of The Course

Head of Department
(Title, Full Name and Signature)