



## GRADUATE LEAVE OF ABSENCE FORM

Student Name Surname :

Student ID :

Student's Signature :

Program/Level of Program :...../.....  Master  Ph.D

Semester of Leave of Absence

Academic Year (20....-20.....) :  Fall Semester  Spring Semester

The Reason for Leave of Absence:

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### FINANCIAL AFFAIRS APPROVAL

Staff in Charge of  
Name Surname:  
Signature:

Explanation:.....  
.....

### STUDENTS AFFAIR (GRADUATE) APPROVAL

Staff in Charge of Name Surname:  
Signature:

Explanation:.....  
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Note: The requests that have not received the Financial Affairs Office's approval will be invalid.