

IZMIR INSTITUTE OF TECHNOLOGY RECTORATE
To the Registrar's Office

The transcript of the student, whose information is given below, has been examined according to the curriculum to which he/she is affiliated, and he is in a position to graduate if he/she fulfils all the necessary conditions at the end of the 20.... – 20.... Academic Year Semester.

SUPERVISOR'S;

Signature :

Date : _____

Name Surname : _____

STUDENT'S INFORMATION;

Name Surname : _____

Student number : Faculty : _____

Department / Program : _____

Language in which the document will be prepared: Turkish English

I request that the document issued in my name be delivered to the person whose information is given below.

Name Surname : _____

Student number : _____