



STUDENT ADDRESS DECLARATION FORM

Name Surname	
Foreign ID Number	
Place and Date of Birth	
Father's Name	
Mother's Name	
Home Address	
Correspondence Address	
E-Mail	
Phone Number (Home)	
Phone Number (Mobile)	
Emergency Contact Number	
School/Vocational School	
Department / Program	

I declare that the identity and address information above is correct, I will accept any notification to be made to me at the stated address, and I will update the changes of my contact information through the automation system within 15 days at the latest.

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NAME SURNAME:

SIGNATURE: