**ISTANBUL MEDIPOL UNIVERSITY**

**2024 - 2025 ACADEMIC YEAR / FALL SEMESTER DOUBLE**

**MAJOR APPLICATION FORM**

|  |  |
| --- | --- |
| **GENERAL INFORMATION** | |
| **NAME SURNAME** |  |
| **ID Number** |  |
| **E-mail Address** |  |
| **Faculty** |  |
| **Major Department / Program** |  |
| **Class / Semester** |  |
| **OSYS Score Type and Score in the Year of Placement** |  |
| **General Weighted Grade Point Average (GANO)** |  |
| **There are classes I failed / There are no classes I failed** |  |

|  |  |
| --- | --- |
| **DEPARTMENT / PROGRAM PREFERENCE** | |
| **Preference** | **Faculty / Department** |
|  |  |

Note: Students enrolled in a major diploma program cannot apply for a double major for the same department. The applications of the candidates who make a contrary choice will be canceled. Only one department within the faculty can be applied.

I accept the accuracy of my statements regarding the application conditions. Otherwise, I declare that I accept the decisions to be taken.

Application Application Date Student Signature:

THIS SECTION WILL BE FILLED BY THE FACULTY AUTHORIZED UNIT.

|  |  |  |
| --- | --- | --- |
| **Dean's Office Review** | **Yes** | **No** |
| Is the course/term appropriate? |  |  |
| Is GANO suitable? |  |  |
| Do you have any courses you failed? |  |  |
| In the 20% bracket? |  |  |
| Do you have any previous recordings? |  |  |
| Is there a quota? |  |  |

Application is convenient

Application Not Eligible

**Relevant Officer**

Name - Surname :

Title :

History - Signature :