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| **İLAHİYAT FAKÜLTESİ DEKANLIĞINA**

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| **Adı Soyadı** | **:** |  |
| **T.C. Kimlik Numarası** | **:** |  |
| **Öğrenci Numarası** | **:** |  |

2023/2024 Eğitim-Öğretim Yılı Bahar dönemi sonu itibariyle azami öğrenim süremi tamamladım. Aşağıda belirtmiş olduğum derslerin Ek-1 Sınavlarına girmek istiyorum. Gereğini arz ederim. …/…/2024 İmza**Adres:****Telefon/e-posta:**

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**Danışman Onayı:** |