



T.R.
İZMİR INSTITUTE OF TECHNOLOGY
School of Foreign Languages Directorate
REGISTRATION SUSPENSION REQUEST FORM

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..../..../20...

I respectfully request to be granted a leave of absence (freeze my enrolment) for the academic year 20.../20..., due to the reasons outlined below.

I kindly request your consideration and approval.

Signature:
Name-Surname:

STUDENT INFORMATION

Student Number	
Program	
Mobile Phone	
Email Address	
Address	

Reason for Requesting Leave

- Military Service ☐
Health ☐
Study Abroad ☐
Other ☐

Reason for "Other" Option:

Have you previously suspended your registration? : ☐ YES ☐ NO

If yes, which academic year: 20.../ 20.... Academic Year

ATTACHMENTS:

1- Registration Suspension Justification Document

NOTE:

It is mandatory to provide documentation for the justification of the registration suspension. Students concerned must submit the Registration Suspension Application Form to the SFL (School of Foreign Languages) Student Affairs Office within two weeks of the start of the academic year.