METU NORTHERN CYPRUS CAMPUS
TRANSFER APPLICATION FORM
2023-2024 FALL SEMESTER

I. PERSONAL DETAILS
Name, Surname: ........................................ Gender: ........................................
Birth Date: ........................................ Phone Number (TRNC): .................................
E-Mail: ........................................ Phone Number (Home Country): .................................
Address: ........................................

II. ACADEMIC INFORMATION
Program: ........................................
Id Number: ........................................

III. PROGRAMS APPLIED

<p>| Programs Applied |</p>
<table>
<thead>
<tr>
<th>(State by priority order)</th>
</tr>
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<tbody>
<tr>
<td>1</td>
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Date: .........../........./............. Signature: ........................................

IV. FOR USE OF THE REGISTRAR’S OFFICE

Opinion of the Registrar’s Office: .................................................................
Explanation:
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