|  |
| --- |
| **I- APPLICANT PERSONAL INFORMATION** (Please write legibly) |
| Name  |  | as in passport |
| Surname |  | **Gender** | **Male** [ ]  **Female** [ ]  |
| Birth | **Place** |  | **Date** | **\_\_\_/\_\_\_/ 20\_\_\_** | **Age** |  |
| Marital Status | **Married** [ ]  **Single** [ ]  |  |  |
| NATIONALTY |  |
| Passport ID |  | **Validity** |  |
| Phone (Mobile) |  | **Email** |  |
| Address |  |
| (If available) T.C. ID |  |  |  |  |  |  |  |  |  |  |  | **Validity** |  |
| II- EDUCATION INFORMATION |
| Graduated From University / Faculty |  | **Graduate School** |  |
|  |
| Department |  |
| Graduation Date |  **\_\_DD\_/\_MM\_\_/ YYYY** |
| III- APPLICATION INFORMATION |
| DEPARTMENT |  | **DISCIPLINE** |  |
| YEAR / SEMESTER | **20\_\_\_ - 20\_\_\_** [ ]  **FALL** [ ]  **SPRING** |
| PROGRAM | [ ]  **MASTER** (MSc)[ ]  **DOCTORATE** (PhD) |
| FINANCIAL SOURCES | [ ]  Funded by myself [ ]  Bilateral agreements as part of Fırat University[ ]  With Scholarship [ ] Government support [ ]  Other |
| I would like to register as a graduate student for the department as I mentioned above. I submit the required documents in full with this Form to the email address of the Graduate School.I hereby declare that the information’s above are true, complete, and correct. Otherwise, I agree to the invalidation of the registration. \_\_DD\_\_/\_MM\_\_\_/ YYYYRequired Documents: Applicant Signature* Diploma (BSc or MSc)
* Transcript (All periods)
* Passport Copy (Legible - clear)
* English Language Certificate (If available)
* Turkish Language Certificate (If available)

ALL DOCUMENTS and THIS FORM SHOULD BE SENT TO the GRADUATE SCHOOL EMAIL ADDRESS BELOWfenbilim@firat.edu.tr |
| Authorized Approval: (Enstitü Yetkilisi) |  |
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