**T.R.**

**NİĞDE ÖMER HALİSDEMİR UNIVERSTIY**

**TO THE DIRECTORATE OF GRADUATE SCHOOL OF EDUCATIONAL SCIENCES**

I am a graduate student registered at your department…………………. with the student number …………... at your institute. Due to ……………………………………, my name / surname / my contact information has changed. My new information is presented below.

I kindly request you to take necessary action

 …… /…… / 20..

 Name Surname

 Signature

**Student Name Surname: ………………………………….**

**T. C. Identification number : ………………………………….**

**Phone. Home: ………………………………… ..**

**Phone. Business : …………………………………..**

**Mobile : …………………………………..**

**Email : @**

**Address :** …………………………………..

……………………………………………………………

……………………………………………………………

**Attachment:**

Original and Photocopy of Marriage / Divorce / Age Disclosure Document

Original ID and Copy of Identity Card

Original and Photocopy of the Court Decision Document