



eastern mediterranean university

TRANSFER APPLICATION FORM

Please stick
your

PHOTO

here

PLEASE USE CAPITAL LETTERS IN COMPLETING THIS FORM

APPLICANT'S

NAME – SURNAME			
FATHER'S NAME			
NATIONALITY			
DATE OF BIRTH		PLACE OF BIRTH	
POSTAL ADDRESS			
TEL. & FAX NUMBERS			
E - MAIL ADDRESS			

PRESENT/PREVIOUS UNIVERSITY	
PRESENT/PREVIOUS DEPARTMENT	
EMU DEPARTMENT APPLIED TO	

I CERTIFY THAT THE INFORMATION GIVEN ON THIS APPLICATION FORM IS ACCURATE. I HEREBY APPLY FOR ADMISSION TO THE EMU. I UNDERSTAND AND ACCEPT THE FACT THAT THE TUITION FEE MAY BE CHANGED IN COMING YEARS.

DATE : SIGNATURE :

IMPORTANT NOTE

TURKISH AND NORTH CYPRUS NATIONALS (TRNC) ARE SUBJECT TO AN APPLICATION FEE OF 20 US\$. PAYMENTS OR MONEY TRANSFERS WILL BE ACCEPTED BY THE BANK IN THE UNIVERSITY CAMPUS OR BY İŞ BANKASI, GAZİMAĞUSA BRANCH, ACCOUNT NO : 6820 - 63 932.

PLEASE

ATTACH THE FOLLOWING DOCUMENTS WITH THE APPLICATION FORM

1. OFFICIAL TRANSCRIPT FROM YOUR PRESENT/PREVIOUS UNIVERSITY.
2. DESCRIPTIONS OF THE COURSES TAKEN.(SHORT COURSE DESCRIPTIONS)
3. PHOTOCOPY OF YOUR PASSPORT OR IDENTITY CARD.

THIS SECTION SHOULD BE COMPLETED BY THE DEPARTMENT CONCERNED

TO THE REGISTRAR,

Mr./Ms. _____

(Applicant's Name & Surname)

HAS BEEN / HAS NOT BEEN

**ACCEPTED BY OUR DEPARTMENT AND WILL BE EXEMPTED FROM THE
FOLLOWING COURSE(S).**

PREVIOUS UNIVERSITY	E X E M P T I O N S	
COURSE CODE	E.M.U. COURSE CODE	E.M.U. REF. CODE

PREVIOUS UNIVERSITY	E X E M P T I O N S	
COURSE CODE	E.M.U. COURSE CODE	E.M.U. REF. CODE

Additional
Information : _____

A P P R O V A L S

Head of Department

Dean / Director

Signature :

Signature :

Date :

Date :