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| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **T.C.** | | | | | | | ÖĞRENCİ TARAFINDAN DOLDURULACAKTIR. | | **BURDUR MEHMET AKİF ERSOY ÜNİVERSİTESİ** | | | | | | | | **TEFENNİ MESLEK YÜKSEKOKULU MÜDÜRLÜĞÜNE** | | | | | | | |  |  |  |  |  | **TEFENNİ/BURDUR** | | | Aşağıda belirtmiş olduğum dersin sınavının tekrar incelenmesi hususunda; | | | | | | | | | Gereğini arz ederim. | | | | | | | |  |  |  |  |  | ……./……./20… | | |  |  |  |  |  |  |  | |  |  |  |  |  | imza:…………………. | | |  |  |  |  | Adı Soyadı……………….…….…..……… | | | | Öğrencinin; |  |  |  |  |  |  | | Bölümü | : | ……………………………………………………………………… | | | I.Ö(……) | II.Ö(……) | | Numarası | : | ……………………………………………………………………… | | |  |  | | Adı, Soyadı | : | ……………………………………………………………………… | | |  |  | | Sınıf / Şube | : | ……………………………………………………………………… | | |  |  | | Dersin Adı | : | ……………………………………………………………………… | | |  |  | | Dersin Kodu | : | ……………………………………………………………………… | | |  |  | | Dersin Öğretim Elemanı | : | …………………………………………………………………….. | | |  |  | | Dönemi | : | Güz (……) Bahar (……) | | |  |  | | Sınav Türü | : | Vize (……) Final (……) Bütünleme(……) | | |  |  | | Aldığı Not | : | ……………………………………………………………………… | | |  |  | | Adres | : | ……………………………………………………………………… | | |  |  | | Tel | : | ……………………………………………………………………… | | |  |  | |  |  | **MÜDÜRLÜK MAKAMINA** | | |  |  | MADDİ HATA KOMİSYONU TARAFINDAN DOLDURULACAKTIR. | | Adı geçen öğrencinin sınav kağıdı tekrar incelenmiş olup aşağıda belirtilmiştir. | | | | | | | | Bilgilerinizi ve gereğini arz ederim. | | | | | | | | |  | | --- | | Maddi hata yoktur. | | | | | | | | | Maddi hata vardır. Yeni notun aşağıda belirtildiği şekilde düzeltilmesi gerekmektedir. | | | | | | | |  |  |  |  |  |  |  | | Dersin Adı | : | ……………………………………………… | |  |  |  | | Sınav Türü | : | |  | | --- | | Arasınav | | |  | | --- | | Yıl Sonu | | |  | | --- | | Bütünleme | | Yaz Okulu |  | |  |  |  |  |  |  | | Eski Notu | : |  |  |  |  |  | | Yeni Notu | : |  |  |  |  |  | | Yeni Harf Notu | : |  |  |  |  |  | |  |  |  |  |  | ……./……./20… | | |  |  |  |  |  |  |  | | Maddi Hata Komisyonu Üyesi Unvanı, Adı ve Soyadı: ………………...……………….. | | | | | İmza: |  | | Maddi Hata Komisyonu Üyesi Unvanı, Adı ve Soyadı: ……………………………...….. | | | | | İmza: |  | | Maddi Hata Komisyonu Üyesi Unvanı, Adı ve Soyadı: ……………………………...….. | | | | | İmza: |  | |
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