



TED UNIVERSITY

REGISTRATION FORM FOR
TRANSFER, DMP/MDP or GRADUATE PROGRAMS

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STUDENT INFORMATION

Name – Surname	ID No.
eMail	Cell Phone
Address	

REGISTRATION TYPE

Transfer	<input type="checkbox"/> Intra-Institutional <input type="checkbox"/> Inter-Institutional <input type="checkbox"/> Central Placement Score (Add Art-1)
	<i>(For transfers from outside of the institution. Please tick only one option)</i> Please specify the reason why you have chosen TEDU: <input type="checkbox"/> Advice from family, friends, etc. <input type="checkbox"/> Program preference <input type="checkbox"/> Academic opportunities / academic staff /education quality <input type="checkbox"/> Score / grade average preference <input type="checkbox"/> English as medium of instruction <input type="checkbox"/> City / location <input type="checkbox"/> Scholarship opportunities <input type="checkbox"/> Familiar TEDU member <input type="checkbox"/> Physical, social, cultural and sports opportunities <input type="checkbox"/> TED/TEDU brand <input type="checkbox"/> Other (.....)
	<i>(For transfers from outside of the institution. Please tick only one option)</i> Please specify the reason why you have left TEDU: <input type="checkbox"/> Maximum period of study at ELS <input type="checkbox"/> Distance from residence address <input type="checkbox"/> Difficulty in English medium of instruction <input type="checkbox"/> Request to study a department not in their own university <input type="checkbox"/> Financial difficulties <input type="checkbox"/> Request to study at a university other than their own <input type="checkbox"/> Program was academically disqualified <input type="checkbox"/> Moving abroad <input type="checkbox"/> Moving to another city <input type="checkbox"/> Turkish being medium of instruction <input type="checkbox"/> Maximum period of undergraduate study <input type="checkbox"/> Health issues <input type="checkbox"/> Academician dissatisfaction <input type="checkbox"/> Campus dissatisfaction <input type="checkbox"/> Other (.....)
	<i>(For transfers from outside of the institution)</i> Did you prefer TEDU at YKS? <input type="checkbox"/> Yes <input type="checkbox"/> No
DMP/MDP	<input type="checkbox"/> Double Major Program <input type="checkbox"/> Minor Degree Program
Graduate Programs	<input type="checkbox"/> Graduate <input type="checkbox"/> PhD

TARGET PROGRAM INFORMATION

Program Title			
Academic Year	Semester	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	

STUDENT	APPROVAL (TEDU Registrar’s Office)
Date/Name-Surname/Signature	<i>Explanation, if any:</i> Date/Name-Surname/Signature

UNCLASSIFIED

* This document is to be classified as “confidential” when filled out.