

To the Chairman of the Board - Rector
NJSC "D. Serikbayev EKTU"

S. Rakhmetullina

Student of the _____ course

Group _____

School _____

_____ - « _____
(code) (name EPG)

_____ »

_____ - « _____
(code) (name EP)

_____ »

(grant/contract)

Full Name: _____

Phone: _____

Application

I request to transfer me from _____ course _____
(school) (code)

« _____ »

(name of the educational program group)

_____ « _____ »
(code) (name of the educational program)

to the _____ course of full-time education of the school _____ to _____
(code)

« _____ »

(name of the educational program group)

to _____ « _____ »
(code) (name of the educational program)

with the retention of the educational grant/ LEB grant.

(select the appropriate option.)

sign _____

date _____

Director of the Academic Department _____

Head of Registrar Office _____

Dean _____

SSC _____