***ISHIK UNIVERSITY***

***DIRECTORATE OF STUDENT AFFAIRS***

***Number: Date: / /201…***

*Subject: Student’s Petition Medical Report (……………………………………………………)*

*To Deanery of Faculty of …………………………………………………………………………*

*This student presented a medical report. We attached a student’s petition and copy of the report. Please, replay student’s petition in a written form to student after your assessment.*

*This report covers the days between*

*………………… and ………………… (Total…days).*

*Type of Medical Report:*

*Commission Medical Report*

*Normal Medical Report*

*Reason to present Medical Report:*

*Attendance Final Exam*

*Midterm Exam Other…………………………………*

***Head of Registrar’s Office***