

TEMPLATE 1

To the Academic Quality Assurance Committee
KAZGUU School of Liberal Arts
JSC "M. Narikbayev KAZGUU University"
from ___ year student/ undergraduate student/
master student / doctoral student
of School of _____
majoring in _____ (code –
educational programme)
at _____ (Russian / Kazakh) department
Full name _____
residing at: _____
house / apartment – street – village / town / city
tel.: _____
e-mail: _____

Application

I am hereby requesting **to have the** " _____ "
course recognized due to _____.

The document is attached.

Date (*year. day. month.*)

Signature

TEMPLATE 2

To the Academic Quality Assurance Committee
KAZGUU School of Liberal Arts
JSC "M. Narikbayev KAZGUU University"
from ___ year student/ undergraduate student/
master student / doctoral student
of School of _____
majoring in _____ (code –
educational programme)
at _____ (Russian / Kazakh) department
Full name _____
residing at: _____
house / apartment – street – village / town / city
tel.: _____
e-mail: _____

Application

I am hereby requesting **to be given a permission for retaking / taking a quiz or examination / submitting an assignment after the deadline on 00/00/00** in “_____” course, _____ level, instructor _____ (full name), due to _____ (indicate the reason).

Documentary evidence (including video / photos / screenshots with date and time) is attached.

Date (*year. day. month.*)

Signature

TEMPLATE 3

To the Academic Quality Assurance Committee
KAZGUU School of Liberal Arts
JSC "M. Narikbayev KAZGUU University"
from ___ year student / undergraduate student/
master student / doctoral student
of School of _____
majoring in _____ (code –
educational programme)
at _____ (Russian / Kazakh) department
Full name _____
residing at: _____
house / apartment – street – village / town / city
tel.: _____
e-mail: _____

Application

I am hereby requesting **to be given a permission for registration for**
_____ **(number) credits** due to _____.

Date (*year. day. month.*)

Signature

TEMPLATE 4

To the Academic Quality Assurance Committee
KAZGUU School of Liberal Arts
JSC "M. Narikbayev KAZGUU University"
from ___ year student / undergraduate student /
master student / doctoral student
of School of _____
majoring in _____ (code –
educational programme)
at _____ (Russian / Kazakh) department
Full name _____
residing at: _____
house / apartment – street – village / town / city
tel.: _____
e-mail: _____

Application

I am hereby requesting **to be given a permission for changing registration from** "_____" **course (instructor _____ (full name) to** "_____" **course** due to _____.

Date (*year. day. month.*)

Signature