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### FORM OF BEING OUT OF THE JOB

We request you to inform us about the staff's clear of accompanying with your department because of his/ her being out of the job, whose name is written below. In case of missing signature, the dismissal of the personnel cannot be completed.

Staff's Title, Name and Surname: .....

<u>Related Departments</u>	<u>Name-Surname</u>	<u>Signature</u>	<u>Accompany</u> <i>Yes / No</i>
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Related Deanship or Directorship

Accounting Directorate

Career and Alumni Center Directorate

Competitive Analysis of Relations Directorate

Continuous Education Center

European Union Research Center

Finance Directorate

Health, Culture, Sports Directorate

Knowledge and Technology Transfer Office

International Office Directorate

IT Directorate

Library&Information Center Directorate

Media Center Directorship

Media Relations Coord. Directorship

Open and Distance Learning Center

Project,Contruction Maint.&Repair and Techn. Affairs Directorate

Public Relations and Marketing Directorate

Purchasing Directorate

Project Support Affairs Directorate

Editorial Office Directorate

Student Affairs Directorate

Support Services Directorate

<u>For Confirmation</u>	<u>Name-Surname</u>	<u>Signature</u>	<u>Accompany</u>	<i>Yes / No</i>
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General Secretary

Human Resources Directorate

\*After taken all signatures and approvals from the Departments, the signed document is submitted to the Human Resources Directorate.