



Name, Surname :..... Member No:.....

Place and Date of Birth :...../..... T.R ID No:.....

Gender :Female...../Male.....

Surname at graduation :

E Mail : Mobile No:.....

Faculty and Department graduated:.....

Associate Degree :.....

Undergraduate Degree :.....

Post Graduate Degree :.....

Doctoral degree :.....

Date of Graduation :...../ School No:.....

Name of Employer Comp. :.....

Position :.....

Work Address :.....

Wrok Tel. :...../.....

E-mail :.....

Home Address :.....

District/City :.....

Home Tel. / :.....

I prefer my Home:-____; Work:_____ address to be used.

- I agree about updating of my information by İstanbul Bilgi University and alumni association and being contacted by them
- I want to be a member of alumni association

I declare that there is no any restriction upon me to be member in accordance of Law of Associations. I hereby acknowledge and undertake in advance to pay 1 TL as entrance fee, 10,00 TL as monthly contribution fee and other fees to be determined by future Executive Board of Association.

Date:

Signature:

BANK ACCOUNTS OF ASSOCIATION

BANK	BRANCH	ACC.NO	IBAN
Garanti Bankası	Çağlayan – 403	6296639	TR10 0006 2000 4030 0006 2966 39

Please print out, complete, sign and send this form.

Required additional documents: Photocopy of ID Card, two passport size photographs