



INTERNATIONAL UNIVERSITY OF SARAJEVO
INTERNACIONALNI UNIVERZITET U SARAJEVU

STUDENT AFFAIRS OFFICE F-125/23,
rev.1

Academic-Professional Master Program Transfer Form

Part I Student Information

Name and Surname	Student ID Number	Study Program	GPA

Part II Type of Transfer (please mark the desired type of transfer):

- Academic to Professional
- Professional to Academic

Request and reasons for appealing for stated issue:

Signature of the Student:

Date:

Part III Approval of the Student's Mentor

	Name and surname	Signature	Date
Student's Mentor			

For Official Use Only

Request received by:
Date: