**DOKUZ EYLÜL UNIVERSITY**

**INTERNATIONAL RELATIONS OFFICE**

**MEETING REQUEST FORM**

Please submit the completed form to international@deu.edu.tr from your official university/organizational email address. Kindly note that we are unable to cover any expenses associated with your visit. Additionally, please be advised that our Office does not facilitate scheduling appointments with Dokuz Eylül University senior management members. We appreciate your understanding and cooperation.

|  |  |
| --- | --- |
| REQUESTOR INFORMATION  (THE PERSON REQUESTING THE MEETING): | |
| Full Name: |  |
| University/Organizational affiliation: |  |
| Department: |  |
| Contact Information (Official University/Organizational Email): |  |
| Contact Information (Phone Number): |  |
| Position/Title: |  |
| Link for University/Organizational Profile: |  |
| Preferred Date and Time for Meeting: |  |
| Alternative Date and Time (if any): |  |
| Meeting Duration: |  |
| Purpose of the Meeting: |  |
| Brief Description of the Meeting Topic: |  |
| Specific Questions or Issues to Address: |  |
| Team Members They Wish to Meet From the DEU International Relations Office: |  |
| Any specific documents or materials needed for the meeting: |  |
| Equipment needs (e.g., projector, conference call setup): |  |
| Additional Notes: |  |
| VISITOR 1 INFORMATION | |
| Full Name: |  |
| University/Organizational affiliation: |  |
| Department: |  |
| Contact Information (Official University/Organizational Email): |  |
| Contact Information (Phone Number): |  |
| Position/Title: |  |
| Link for University/Organizational Profile: |  |
| VISITOR 2 INFORMATION | |
| Full Name: |  |
| University/Organizational affiliation: |  |
| Department: |  |
| Contact Information (Official University/Organizational Email): |  |
| Contact Information (Phone Number): |  |
| Position/Title: |  |
| Link for University/Organizational Profile: |  |
| VISITOR 3 INFORMATION | |
| Full Name: |  |
| University/Organizational affiliation: |  |
| Department: |  |
| Contact Information (Official University/Organizational Email): |  |
| Contact Information (Phone Number): |  |
| Position/Title: |  |
| Link for University/Organizational Profile: |  |
| VISITOR 4 INFORMATION | |
| Full Name: |  |
| University/Organizational affiliation: |  |
| Department: |  |
| Contact Information (Official University/Organizational Email): |  |
| Contact Information (Phone Number): |  |
| Position/Title: |  |
| Link for University/Organizational Profile: |  |
| VISITOR 5 INFORMATION | |
| Full Name: |  |
| University/Organizational affiliation: |  |
| Department: |  |
| Contact Information (Official University/Organizational Email): |  |
| Contact Information (Phone Number): |  |
| Position/Title: |  |
| Link for University/Organizational Profile: |  |