

INTERN ASSESSMENT FORM

<u>Intern Student</u>			Evaluator				
Name – Surname:			Name – Surname:				
Student Number:			Title:				
Department:			Contact Information:				
Internship Code (mark only one)			Date, St	Date, Stamp and Signature			
□ INDE2910	□ INDE3920						
□ INDE3910	□ INDE4920						
Industrial Training Fire	n						
Name and Address:							
Starting date of training: / Finishing of			ate of trainin	g: / /	Duration:		
Saturday shift of working*: □ Done			□ Not done				
		etter which is approved by the firm should be given to the					
udent which clearly states th	ne Saturdays are	accounted as	working days	S			
Evaluation Table			Poor	Satisfactory	Good	Excellent	
Creativity							
Responsibility							
Self confidence							
Individual work							
Work attitude							
Teamwork							
Communication (written and oral)							
Ability to give and receive instructions							
Attendance							
Overall evaluation							
Comments and suggest	ions about the	progress of	f the intern	<u> </u>			
30		_					
Would you consider employing this intern in the future? \Box Yes \Box No							
Would you consider em	ploying other	interns fro	m Işık Univ	ersity next year	? 🗆 🗅 🤉	Yes □ No	

General principles of industrial training:

- 1. Duration of the industrial training cannot be less than 20 work days. Sundays and public holidays are not counted as working days. Subjects, periods and duration of industrial training are set by the department/program commission.
- 2. The students are liable for preparing an "Internship Report" about the activities of internship and deliver it on time. With the report that is approved by an authorized person, "Internship Application Form" which the student has a copy of it and "Internship Assessment Form" which is filled, approved by an authorized person and put in an envelope are delivered by the intern or post directly to the department.