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|  | **INTERNSHIP FORM** |

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| **To whom it May concern,**  Students of the ..................................Department / Program are required to complete a compulsory internship in business firms and organizations before the end of their study period. We would like to thank you for your support to our student whose details are given below during her/his internship at your company for ….... days. |

|  |
| --- |
| ( Photo ) |

**STUDENT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| ID No: |  |  |  |
| Name Surname : |  | Student No: |  |
| Department /Program: |  | Internship No: | ..... 190 ..... 290 ..... 390 |
| E- Mail : |  | Cell Phone Number : |  |
| Address : |  | | |

**INTERNSHIP COMPANY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | | | | |
| Address : |  | | | | |
| Production / Service Area: |  | | | | |
| Phone: |  | | Fax: |  | |
| E-Mail: |  | | Web Address: |  | |
| **Internship Starting Date:** |  | **Ending Date:** |  | **Working Days** |  |

|  |  |
| --- | --- |
| **Internship Days Schedule** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Internship Application Type:** | |  | | --- | |  |  |  | | --- | |  |   Compulsory İnternship On-site Internship   |  | | --- | |  |  |  | | --- | |  |   Voluntary Internship Online Internship |

**COMPANY AUTHORIZED PERSON**

|  |  |  |  |
| --- | --- | --- | --- |
| Name Surname: |  | | |
| Job and Title : |  | Signature / Stamp |  |
| E- Mail: |  |
| Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **STUDENT SIGNATURE** | **DEPARTMENT / PROGRAM APPROVAL** | **DEAN / DIRECTORATE APPROVAL** | **INTERNSHIP OFFICE** |
| I hereby confirm that the information given on this form is true. I kindly request the documents required for the internship to be prepared. | Electronic approval is given. | Electronic approval is given. | Electronic approval is given. |
| Date : | Date : | Date : | Date : |

**NOTE** : **At least 15 days before** the start date of the Compulsory/Voluntary internship, 1 internship application form, employer information form, photocopy of ID, 1 passport-sized photograph attached to the form, and the student's notification by e-mail to the advisor responsible for the internship, It is obligatory to send an e-mail to the Faculty / Vocational School Department Secretariat. It is important to fill out the forms in the computer environment. **Forms not received on time will not be processed**. An e-mail will be sent to the student by the Faculty/Vocational School Department Secretariat before the SSI Declarations start date of the internship.