



GAZİ ÜNİVERSİTESİ MÜHENDİSLİK FAKÜLTESİ
GAZI UNIVERSITY FACULTY OF ENGINEERING

INTERNSHIP FORM

Resim Yapıştırarak
Bölüm Staj
Komisyonuna
Onaylatılacaktır.

Fotokopi resim
kullanmayınız.

TO WHOM IT MAY CONCERN,

The students of the faculty have to accomplish necessary internships before they complete their courses under the regulations of undergraduate educations. We kindly appreciate if you accept the students whom detailed info is shown below for accomplishing his/her study at your facilities.

Name, Lastname		Citizenship # of Turkey	
Student nr.		Year	
e-mail		Contact phone	
Home Address			

INFORMATIONS ABOUT THE COMPANY

Starting date		Ending date		Duration (working days)	
Company name					
Company address					
Field of activity					
Phone		Fax			
e-mail		Web			

AUTHORIZED/RESPONSIBLE PERSON

Name, Lastname			
Position			The student can accomplish his/her internship at our facility Signature/ Stamp
e-mail			
Date			
Employer's tax #			

I, hereby declare that all the information above is correct. Date: Student signature	Date: Approval of the Department's Commission	Date: Approval of the Faculty
--	--	--------------------------------------

Note: This form is prepared in two original copy. One of the copies must be delivered to department's commission in 2 to 30 days before the practice starts. The other copy must be delivered to students affairs of the faculty with two additional photos as well (*due dates are sharp in order to complete the paperwork between SGK and Gazi University*).