

# 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	ŧ
	of Turkey	
Student nr.	Year	
e-mail	Contact phone	
Home Address		

### INFPORMATIONS 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	
e-mail	accomplish his/her	
Date	internship at our facilit	у
Employer's tax #	Signature/ Stamp	

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