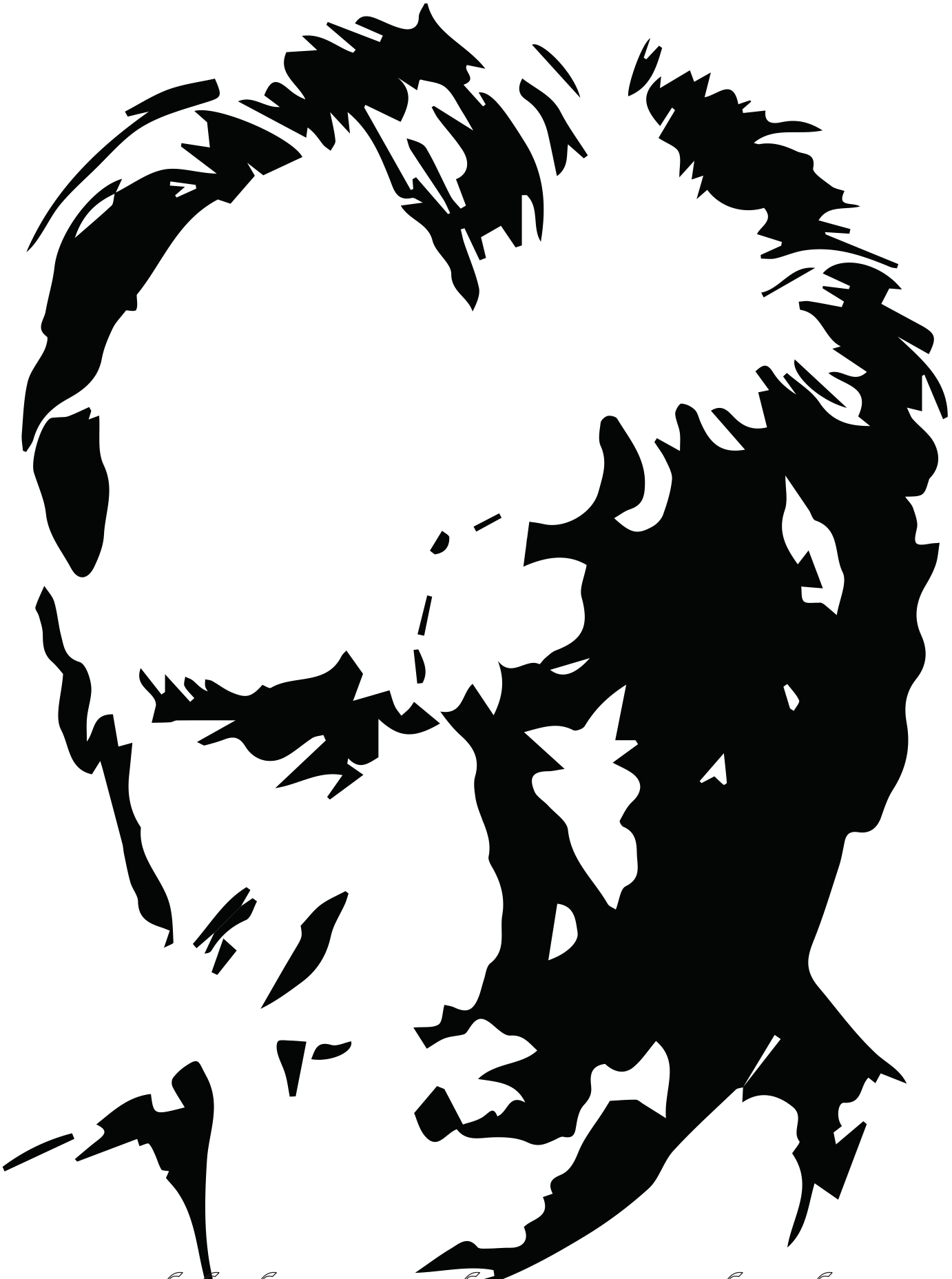
İZMİR KONAK MESLEK YÜKSEKOKULU

İZMİR KONAK
MESLEK YÜKSEKOKULU

STAJ DEFTERİ

RECORD OF INTERNSHIP

www.konak.edu.tr



Mesleki becerisi olmayan toplumlar rekabet edemezler.

M. Atatürk

İZMİR KONAK
MESLEK YÜKSEKOKULU

20... - 20... ACADEMIC YEAR

STUDENT'S

Full Name : .....

Program : .....

Student no. : .....

ABOUT THE WORKPLACE/INSTITUTION

Name - Title : .....

Address : .....

Contactno. : .....

ABOUT THE TRAINING SUPERVISOR

Full name : .....

Function : .....

İZMİR KONAK
MESLEK YÜKSEKOKULU

INTERNSHIP DIRECTIVE

You will begin your 40 working-day internship, which will be an essential step in transforming the theoretical education you received at our school into practice and productivity. We kindly request that you to comply with the following details during your internship period, and wish you success in your duties

PROFESSIONAL TRAINING AND INTERNSHIP COORDINATION OFFICE

A. PRE-INTERNSHIP PREPARATIONS:

1. Students must apply to the Internship Coordination Office for the determination of a suitable workplace and all necessary information regarding internship processes.
2. Students must obtain information about the Internship Application Form from Student Affairs, and subsequently obtain the necessary signatures.

B. CONDUCT AND BEHAVIOUR DURIND THE INTERNSHIP:

1. The Record of Internship and Internship Assessment Form are handed over to the authorized office of the workplace/institution.
2. The Intern is effectively an employee at the workplace/institution for the duration of their internship. The interns are expected to adhere by the working conditions of the company/workplace.
3. Interns are expected to follow the instructions given by their supervisors at the workplace/institution.
4. Your work is expected to be assessed daily by your supervisor at the workplace/institution. In addition; add any attachments (images, projects etc.) by attaching them onto a sheet of paper, after the printed for has been filled out. Have forms recording your daily work signed by the authorised person at the end of each working day.
5. Make effort to personally use the necessary tools and equipment during your internship. Aim to maximise your knowledge and experience.

C. PREPARING THE INTERNSHIP FILES

1. The Record of Internship must be filled out by the workplace/institution at the end of the Internship period.
2. The Name-Title-Address of the workplace/company must be written and the form must be stamped and signed by the authorised person at the workplace/institution.
3. The report must include; all the work that has been observed and conducted at the workplace in detail, and all image, photographs, charts, graphs, forms and assorted data must be included in the appropriate sections and within a specific order.
4. Each page of the completed Record of Internship must be stamped and signed by the authorised person at the workplace/institution.

D. POST-INTERNSHIP

1. When leaving the workplace/institution, acquire a document recording the beginning and ending dates of your internship from the authorised office.
2. The Assessment Form must be filled out and sent to our school, by the

workplace/institution. Remind them in an appropriate manner.
2. Submit the Internship File to the **Internship Coordination Office** within 15 days of completion.

DAILY INTERNSHIP JOURNAL

Starting Date	:
Ending Date	:
Number of Work Days	:
Date	:
Scope of Work:	
Authorised Person	
Full Name:	
Function and Signature:	

* Please fill out accordingly with the items listed in the Internship Directive.