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| C:\Users\Merty\AppData\Local\Microsoft\Windows\INetCache\Content.Word\omerhalisdemiruniversitesipngen.png | **REPUBLIC OF TURKEY****NIGDE OMER HALISDEMIR UNIVERSITY****NIGDE VOCATIONAL SCHOOL OF SOCIAL SCIENCES****DEPARTMENT OF …....…………………..****Internship Evaluation Form** |

|  |  |  |
| --- | --- | --- |
| Name, Surname |  | PHOTOGRAPH |
| Department |  |
| Student ID Number |  |
| Program  |  Daytime Evening |
| Institution Name |  |
| Internship Start Date |  |
| Internship End Date |  |
| Number of Working Days |  |
| Number of days not worked |  |
| Internship Cycle |  1st cycle 2nd cycle  |
|  | CONSIDERATIONS | Grade |
| Attendance |  |  |
| Determination to work |  |  |
| Attitude towards the manager |  |  |
| Attitude towards the co-workers |  |  |
| **Grades:** A(Excellent) B(Good) C(Fair) D(Below Average) E(Insufficient) |
| **APPROVAL** |
| The name, surname, signature and seal of the workplace's manager who controls the work | Result and Approval(This part will be filled in by the departmental internship commission.) |
|  |  |

**NOTE:** The Internship Evaluation Form will be filled in 2 (two) copies after the internship of the student is over. The second copy will be delivered to the trainee in a sealed envelope to be given to the Departmental Internship Commission.