

Süleyman Demirel University Faculty of Engineering and Applied Sciences Mandatory Internship Form

Photo taken in the last 6 months

Whom It May Concern,

Student Number:

Undergraduate students enrolled in the Department of Industrial Engineering are required to complete internships in manufacturing facilities and managerial units as part of their graduation requirements. The student whose details are provided below intends to fulfill a 25-working-day internship at your institution.

We appreciate your consideration and support.

Department Internship Commission

STUDENT'S INFORMATION

Student's Name:					
Turkish Identification Number:		Academic Year:	20/20		
Email:		Phone Number:			
Address of Residence:					
INTERNSHIP INFORMATION					
Company Name:					
Company Address:					
Department:					
Phone Number:					
Email:					
Website:					
Internship Start Date:					
Internship Completion Date:					
Internship Duration (Working day):					

Student's Signature	Company/Institution Approval	Deparmant Approval
I, the undersigned, certify that the information provided above is correct and accurate. I request the issuance of internship documents for the company mentioned and accept full responsibility for my internship. Student's Name and Surname: Signature:	(Signature/Seal)	To be completed by the University Department only (Stamp/Seal & Signature)
Date:/20		