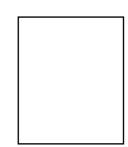
_				
n	1	٠	n	
v	а	u	c	





COMPULSORY INTERNSHIP FORM (INTERNSHIP APPLICATION FORM)

The student with information given below intends to do their compulsory internship on the specified dates at your institution/establishment.

 $\underbrace{L^a : \check{s}oee@ \ddot{k} \check{s}^a ce^{-3} }_{} \underbrace{ \underbrace{\sharp \times 5510}^a \pm \mathbb{C} }_{} ; @ \ddot{Y} law : our student's # \underbrace{ eee-\check{s}^o \underbrace{\sharp a}^a \check{s}^{\cdots o} coe \underline{\mathring{W}}_{i}^i a^{\circ -} \check{s}^a \dot{Y}^i \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \cdot \cdot \cdot \cdot}_{} e^{-1} \underbrace{ \underbrace{\sharp a}^i \check{s}^{-1} }_{} \underbrace{ \underbrace{\check{a}^i \check{s}^{-1} }_{}$ Insurance needed during the $\S^\circ_i \otimes^- x \to -e \operatorname{riod}^3 \S^\circ_i \to x \to -e \operatorname{riod}^3 \to -e \operatorname{riod}^3 \S^\circ_i \to x \to -e \operatorname{riod}^3 \to -e \operatorname{ri$

*Internships must be done in accordance with the Internship Learning Objectives (which can be found in the Internship tab).

Student Information				
TCKN				
Name-Surname				
School Number	Year			
E- mail Address	Phone Number			
Residence Address				

Internship Institution/Establishment Information				
Name				
Address				
Phone Number		Fax Number		
E- mail Address		Web Address		
Internship Period	//			
Institution/ Establishment Official				
(Name-Surname, Task and Signature-Seal)				

- * The dates of the internship must be written in the Internship Period section.
 * This document must be signed and submitted to the Dean's Secretary with a copy of the identity document one month before the end of the academic year or the date specified by the Internship Commission.
- * The student's photograph should be attached to the right corner.
- * This document is recognized as a Workplace Internship Agreement.

Internship Commission (APPROVAL)	Deanship (APPROVAL)