**STAJ RAPORU SAYFASI ÖRNEĞİ**

|  |
| --- |
| **ÖĞRENCİNİN ÇALIŞTIĞI BÖLÜM: ................................................................................................** |
| **TARİH: …./…../………** |
|  |
| **KONTROL EDEN BİRİM SORUMLUSU: .......................................................................................****İMZA, KAŞE/MÜHÜR : .......................................................................................** |

**TRAINING REPORT PAGE**

|  |
| --- |
| **THE NAME OF THE DEPARTMENT WORKED AS INTERN: …………………………………………………** |
| **DATE: …./…../………..** |
|  |
| **APPROVAL OF THE AUTHORIZED PERSON FOR INTERNSHIP: …………………………………………..****SIGNATURE, COMPANY STAMP/SEAL : …………………………………………..** |

## ESKİŞEHİR TEKNİK ÜNİVERSİTESİ MÜHENDİSLİK FAKÜLTESİ

(Times New Roman Kalın 18 Font)

# Staj Raporu

(Times New Roman Kalın 22 Font)

### Öğrencinin

**Adı – Soyadı :**

**T.C. Numarası :** (Times New Roman Kalın 16) Font)

### Bölümü:

**ESKİŞEHİR**

## ESKİŞEHİR TECHNICAL UNIVERSITY FACULTY OF ENGINEERING

(Times New Roman, Bold, 18 pt Font)

# Internship Report

(Times New Roman, Bold, 22 pt Font)

### Student’s

**Name and Surname :**

**ID Number:** (Times New Roman, Bold, 16 pt Font)

### Department:

**ESKİŞEHİR**

**ESKİŞEHİR TEKNİK ÜNİVERSİTESİ MÜHENDİSLİK FAKÜLTESİ**

**STAJ RAPORU İÇ KAPAK SAYFASI**

Fotoğraf

**ÖĞRENCİNİN;**

Adı–Soyadı : …………………………………………………….

T.C. Numarası : …………………………………………………….

Bölümü : …………………………………………………….

Kayıt Yılı : …………………………………………………….

**STAJ YAPILAN KURUM/KURULUŞUN**;

Adı : ……………………………………………………..

Adresi : ……………………………………………………..

Telefon : ……………………………………………………..

Faks : ……………………………………………………..

E‐mail : …………………………………………………….. Stajın Başlangıç Tarihi : …………………………………………………….. Stajın Bitiş Tarihi : ……………………………………………………..

**STAJ YAPILAN KURUM/KURULUŞUN STAJDAN SORUMLU PERSONELİNİN;**

İmza‐Mühür : ……………………………………..

Unvanı : …………………………………….

Adı–Soyadı : ………………………………………………………………….

**ESKİŞEHİR TECHNICAL UNIVERSITY FACULTY OF ENGINEERING**

**INTERNSHIP REPORT INNER COVER PAGE**

Photo

**STUDENT’S;**

Name‒Surname : ………………………………………

ID Number : ………………………………………

Department : ………………………………………

Registration Year : ………………………………………

**INSTITUTION/ORGANIZATION;**

|  |  |
| --- | --- |
| Name | : …………………………………………………….. |
| Address | : …………………………………………………….. |
| Phone | : …………………………………………………….. |
| Fax | : …………………………………………………….. |
| E‐mail | : …………………………………………………….. |
| Internship Start Date | : …………………………………………………….. |
| Internship End Date | : …………………………………………………….. |

**INSTITUTION/ORGANIZATION AUTHORIZED PERSON FOR INTERNSHIP;**

Signature‐Seal : …………………………………………………………….

Title : …………………………………………………………….

Name‒Surname :…………………………………………………………….