Internship Guide

**Internship Guide**

**Procedure at the Beginning of Internship:**

1- It is essential for the students who to continue to their internship in the summer term.

2- Internship period is 30 working days.

3- The student submits his / her application to the place where he / she wants to do an internship with the Form of Applicable Internship Application Form and the Mandatory Internship Acceptance Form (Form 1-3).

4- The student approved by the company will apply to the Internship Committee at least 1 month before the starting date of the internship with the application form (Form 2) and the approved Compulsory Internship Acceptance Form (Form 3). The Internship Committee approves the petitions if it is appropriate.

5- After the approval process the documents (Internship Directive, Internship Practice Guide, Form No: 4, Form No: 5, Form No: 6) shall be submitted to the Dean secretary by student.

\* Required documents are taken from the web of Near East University Faculty of Veterinary Medicine.

**Preparing the Internship File:**  
Students fill in the Internship Program Book (Form 6) on a daily basis. Each page is stamped and signed by the company representative and / or the responsible veterinarian.

**Post-Internship:**  
1- Form No: 4 and 5 must be filled and approved by the workplace authority, then it must be sent to the school with attendance chart in a closed envelope with the student or by post.

2- The obligatory internship files are submitted to the internship commission.

3- The Internship Committee forms the Internship Sub Evaluation Boards. Sends files to related boards.

4- The Internship Sub-Evaluation Board convenes on the announced dates and completes the exam and completes the Internship Evaluation Form (Form No: 7) and submits the list containing the results to the Internship Committee with a letter.

5- The Internship Commission submits the results to the Dean.

6- After the decision of the Board of Directors, the Dean shall announce the final results.

Form No 1: Compulsory Internship Application Letter

**Number:** ……/………/……….

**Topic**: Internship.

Dear

Our faculty is a higher education institution that provides education at the undergraduate level.

In accordance with the Regulation, a student must perform at least 30 working days of practical training (internship) during his / her education period.

It is considered that it would be beneficial for the student / students of our faculty to write an internship at your workplace / Faculty to be counted in their legal internship periods.

If this request is evaluated and if this opportunity can be provided at your workplace / Faculty, we express our gratitude to you for providing information to our Deanery Office at least one (1) month before the starting date of the internship.

DEAN

Prof. Dr. Deniz SEYREK İNTAŞ

STUDENT

School number Name and Surname E-mail Address

Form No 2: Student Application Letter

………/………/……….

**NEAR EAST UNIVERSITY**

**DEAN OF THE VETERINARY FACULTY**

I am student of your faculty and ………… is my student number.I would like to express my wish that I would like to do my compulsory internship in the company where the address information is given.

Student:

Address:

Tel:

Work place:

Address:

Tel:

Name-Surname

SIGNATURE

…….…………………………

Note:Compulsory Internship Acceptance Form is attached.

Form No 3:Compulsory Internship Acceptance Form.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Information for the Internship Workplace | | | | | | | |
| Name |  | | | | | | |
| Address |  | | | | | | |
| Production / Service Area |  | | | | | | |
| Telephone No. |  | | Fax No. | |  | | |
| E-Mail |  | | Web Address | |  | | |
| **Beginning Date of Internship Program** |  | **End Date** | |  | | **Duration(Day)** |  |
| **Workplace**  **Signature and Bowl** | | | | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | STUDENT'S POPULATION REGISTRATION INFORMATION(If the internship application is accepted, it is filled by the student) | | | | | Surname |  | City |  | | Name |  | County |  | | Father’s name |  | Street - Village |  | | Mother’s name |  | Volume no. |  | | Place of birth |  | House rang No. |  | | Date of birth |  | Line No. |  | | ID of Turkish Republic |  | Department of Population |  | | Serial number of population number |  | Reason of Delivery |  | | Number of Social Insurance Institution |  | Date of issue |  | | | | | | | | |

Form No 4:Workplace Evaluation Form.

**Workplace Evaluation Form**

**Student Workplace**

Name-Surname: Name:

Internship Branch: Address:

Duration of Internship: Tel No:

Internship Starting-Ending Date: E-mail:

Coordinator: Fax No:

Name-Surname: Educational Staff: Name- Surname:

Dear Business Officer,

Our internship students; In order to determine the level of knowledge, skill, bilateral relations and the level of internship, please fill the following table carefully.

**Rating Table**

|  |  |
| --- | --- |
| **FEATURES** | **NOTE** |
| Interest to Job |  |
| Detection Power |  |
| Sense of Responsibility |  |
| Working Speed |  |
| Time/ Efficient Use |  |
| Problem Solving Ability |  |
| Socializing with others |  |
| Follow the rules |  |
| Capability to Use Information |  |

I express that the grade of the student named……………………………………………..who made internship in our workplace is ……………………..out of 100.

Workplace Officer and / or Veterinarian

Name- Surname:

Signature:

Bowl:

NOTE: Once this form has been filled in and approved by the workplace authority, it must be sent to the school with attendance chart in a closed envelope with the student or by post.

Form No 5: Attendance table of workplace.

**ATTENDANCE TABLE OF WORKPLACE**

Student Name-Surname: Number:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No | Date | Department | Work Done | Signature |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
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| 22 |  |  |  |  |
| 23 |  |  |  |  |
| 24 |  |  |  |  |
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| 28 |  |  |  |  |
| 29 |  |  |  |  |
| 30 |  |  |  |  |

Form No 6: Zorunlu Staj Dosyası Kapak Sayfası.

Compulsory Internship File Cover Page

YAKINDOĞU ÜNİVERSİTESİ

VETERİNER FAKÜLTESİ

NEAR EAST UNIVERSITY

FACULTY OF VETERİNARY MEDICINE

STAJ PROGRAM DEFTERİ

THE SUMMER PRACTICE DIARY

ÖĞRENCİNİN STUDENT’S

SOYADI, ADI-SURNAME, NAME: ................................................

ÖĞRENİM YILI- TRAINING YEAR: ................................................

**Haftalık Staj Programı\***

**Weekly Training Program\***

[\*] Haftalık programın her sayfası kaşelenecek.

The weekly programs, each page of the report and the training certificate must be signed and stamped.

…………........... Tarihinden ...... …………......................tarihine kadar bir haftalık çalışma

*From .......…………................. to ...... …………..................weekly service*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **GÜNLER**  *Days* | **YAPILAN İŞLER**  *Work Accomplished* | **SAYFA NO**  *Page Number* | **ÇALIŞILAN SAAT** *Working Hours* | |
| **Pazartesi**  *Monday* |  |  |  |  |
| **Salı**  *Tuesday* |  |  |  |  |
| **Çarşamba**  *Wednesday* |  |  |  |  |
| **Perşembe**  *Thursday* |  |  |  |  |
| **Cuma**  *Friday* |  |  |  |  |
| **Cumartesi**  *Saturday* |  |  |  |  |
| **Pazar**  *Sunday* |  |  |  |  |
| **Toplam**  *Total* | | |  |  |

Kontrol edenin ünvanı, soyadı, adı :

*Name and title of the controlling superior*

İmza ve kaşe :

*Signature and stamp*

Öğrencinin imzası :

*Signature of trainee*

Çalıştığı iş yeri ve kısmı :

*Work place*

[\*] Haftalık programın her sayfası kaşelenecek.

The weekly programs, each page of the report and the training certificate must be signed and stamped.

…………........... Tarihinden ...... …………......................tarihine kadar bir haftalık çalışma

*From .......…………................. to ...... …………..................weekly service*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **GÜNLER**  *Days* | **YAPILAN İŞLER**  *Work Accomplished* | **SAYFA NO**  *Page Number* | **ÇALIŞILAN SAAT** *Working Hours* | |
| **Pazartesi**  *Monday* |  |  |  |  |
| **Salı**  *Tuesday* |  |  |  |  |
| **Çarşamba**  *Wednesday* |  |  |  |  |
| **Perşembe**  *Thursday* |  |  |  |  |
| **Cuma**  *Friday* |  |  |  |  |
| **Cumartesi**  *Saturday* |  |  |  |  |
| **Pazar**  *Sunday* |  |  |  |  |
| **Toplam**  *Total* | | |  |  |

Kontrol edenin ünvanı, soyadı, adı :

*Name and title of the controlling superior*

İmza ve kaşe :

*Signature and stamp*

Öğrencinin imzası :

*Signature of trainee*

Çalıştığı iş yeri ve kısmı :

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…………........... Tarihinden ...... …………......................tarihine kadar bir haftalık çalışma

*From .......…………................. to ...... …………..................weekly service*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **GÜNLER**  *Days* | **YAPILAN İŞLER**  *Work Accomplished* | **SAYFA NO**  *Page Number* | **ÇALIŞILAN SAAT** *Working Hours* | |
| **Pazartesi**  *Monday* |  |  |  |  |
| **Salı**  *Tuesday* |  |  |  |  |
| **Çarşamba**  *Wednesday* |  |  |  |  |
| **Perşembe**  *Thursday* |  |  |  |  |
| **Cuma**  *Friday* |  |  |  |  |
| **Cumartesi**  *Saturday* |  |  |  |  |
| **Pazar**  *Sunday* |  |  |  |  |
| **Toplam**  *Total* | | |  |  |

Kontrol edenin ünvanı, soyadı, adı :

*Name and title of the controlling superior*

İmza ve kaşe :

*Signature and stamp*

Öğrencinin imzası :

*Signature of trainee*

Çalıştığı iş yeri ve kısmı :

*Work place*

[\*] Haftalık programın her sayfası kaşelenecek.

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…………........... Tarihinden ...... …………......................tarihine kadar bir haftalık çalışma

*From .......…………................. to ...... …………..................weekly service*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **GÜNLER**  *Days* | **YAPILAN İŞLER**  *Work Accomplished* | **SAYFA NO**  *Page Number* | **ÇALIŞILAN SAAT** *Working Hours* | |
| **Pazartesi**  *Monday* |  |  |  |  |
| **Salı**  *Tuesday* |  |  |  |  |
| **Çarşamba**  *Wednesday* |  |  |  |  |
| **Perşembe**  *Thursday* |  |  |  |  |
| **Cuma**  *Friday* |  |  |  |  |
| **Cumartesi**  *Saturday* |  |  |  |  |
| **Pazar**  *Sunday* |  |  |  |  |
| **Toplam**  *Total* | | |  |  |

Kontrol edenin ünvanı, soyadı, adı :

*Name and title of the controlling superior*

İmza ve kaşe :

*Signature and stamp*

Öğrencinin imzası :

*Signature of trainee*

Çalıştığı iş yeri ve kısmı :

*Work place*

[\*] Haftalık programın her sayfası kaşelenecek.

The weekly programs, each page of the report and the training certificate must be signed and stamped.

…………........... Tarihinden ...... …………......................tarihine kadar bir haftalık çalışma

*From .......…………................. to ...... …………..................weekly service*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **GÜNLER**  *Days* | **YAPILAN İŞLER**  *Work Accomplished* | **SAYFA NO**  *Page Number* | **ÇALIŞILAN SAAT** *Working Hours* | |
| **Pazartesi**  *Monday* |  |  |  |  |
| **Salı**  *Tuesday* |  |  |  |  |
| **Çarşamba**  *Wednesday* |  |  |  |  |
| **Perşembe**  *Thursday* |  |  |  |  |
| **Cuma**  *Friday* |  |  |  |  |
| **Cumartesi**  *Saturday* |  |  |  |  |
| **Pazar**  *Sunday* |  |  |  |  |
| **Toplam**  *Total* | | |  |  |

Kontrol edenin ünvanı, soyadı, adı :

*Name and title of the controlling superior*

İmza ve kaşe :

*Signature and stamp*

Öğrencinin imzası :

*Signature of trainee*

Çalıştığı iş yeri ve kısmı :

*Work place*

[\*] Haftalık programın her sayfası kaşelenecek.

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…………........... Tarihinden ...... …………......................tarihine kadar bir haftalık çalışma

*From .......…………................. to ...... …………..................weekly service*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **GÜNLER**  *Days* | **YAPILAN İŞLER**  *Work Accomplished* | **SAYFA NO**  *Page Nr.* | **ÇALIŞILAN SAAT** *Working Hours* | |
| **Pazartesi**  *Monday* |  |  |  |  |
| **Salı**  *Tuesday* |  |  |  |  |
| **Çarşamba**  *Wednesday* |  |  |  |  |
| **Perşembe**  *Thursday* |  |  |  |  |
| **Cuma**  *Friday* |  |  |  |  |
| **Cumartesi**  *Saturday* |  |  |  |  |
| **Pazar**  *Sunday* |  |  |  |  |
| **Toplam**  *Total* | | |  |  |

Kontrol edenin ünvanı, soyadı, adı :

*Name and title of the controlling superior*

İmza ve kaşe :

*Signature and stamp*

Öğrencinin imzası :

*Signature of trainee*

Çalıştığı iş yeri ve kısmı :

*Work place*

-Haftalık programın ayrıntıları aşağıdaki sayfalara el yazısı ile “günlük” olarak yazılacaktır. Yapılan işle ilgili teknik rapor ayrıca “GENEL RAPOR” kısmında verilecektir.

*-Details of the weekly training program will be written in handwriting on the following pages, as a “diary”. The technical report about the complete work done, will be given separately in the “GENERAL REPORT” section.*

|  |  |
| --- | --- |
| **Kısım**  *Section* | **Yaprak No 1**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 2**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |

|  |  |
| --- | --- |
| **Kısım**  *Section* | **Yaprak No 3**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 4**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |

|  |  |
| --- | --- |
| **Kısım**  *Section* | **Yaprak No 5**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 6**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |

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| --- | --- |
| **Kısım**  *Section* | **Yaprak No 7**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 8**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| **Kısım**  *Section* | **Yaprak No 9**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| **Kısım**  *Section* | **Yaprak No 10**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| --- | --- |
| **Kısım**  *Section* | **Yaprak No 11**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 12**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |

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| --- | --- |
| **Kısım**  *Section* | **Yaprak No 13**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 14**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |

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| --- | --- |
| **Kısım**  *Section* | **Yaprak No 15**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 16**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| **Kısım**  *Section* | **Yaprak No 17**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 18**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| --- | --- |
| **Kısım**  *Section* | **Yaprak No 19**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 20**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| --- | --- |
| **Kısım**  *Section* | **Yaprak No 21**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 22**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| **Kısım**  *Section* | **Yaprak No 23**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 24**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| --- | --- |
| **Kısım**  *Section* | **Yaprak No 25**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 26**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| --- | --- |
| **Kısım**  *Section* | **Yaprak No 27**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 28**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
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| **Kısım**  *Section* | **Yaprak No 29**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |
| **Kısım**  *Section* | **Yaprak No 30**  *Page Nr.* |
| **Yapılan İş**  *Work Done* | **Tarih**  *Date* |
|  | |