

TRAINING REPORT PAGE

THE NAME OF THE DEPARTMENT WORKED AS INTERN:

DATE: / /

APPROVAL OF THE AUTHORIZED PERSON FOR INTERNSHIP:

SIGNATURE, COMPANY STAMP/SEAL :



ANADOLU UNIVERSITY
FACULTY OF ECONOMICS AND ADMINISTRATIVE SCIENCES

(Times New Roman, Bold, 18 pt Font)

Internship Report

(Times New Roman, Bold, 22 pt Font)

Student's

Name and Surname :

ID Number

Department

:

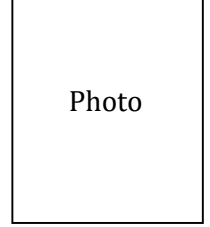
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ESKİŞEHİR



T.R.
ANADOLU UNIVERSITY
FACULTY OF ECONOMICS AND ADMINISTRATIVE SCIENCES
INTERNSHIP REPORT INNER COVER PAGE



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 :