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**FACULTY OF BUSINESS AND ADMINISTRATIVE SCIENCES**

**DEPARTMENT OF .........................................................................**

**COMPULSORY INTERNSHIP PROGRAMME**

**INTERNSHIP REPORT**

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| **Contents:**   1. **Information on the Student and Institution/Corporation** |
| 1. **Internship Diary** |
| 1. **The Analysis of the Institution/ Corporation and the Internship Process** |

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| --- | --- |
| **STUDENT INFORMATION** | |
| Name-Surname |  |
| Department/ Student No |  |
| Phone |  |
| GSM |  |
| E-mail |  |
| Internship Dates |  |
| **INSTITUTION/CORPORATION INFORMATION** | |
| Name of the Institution/Corporation |  |
| Address |  |
| Authorized Person |  |
| Title |  |
| Phone |  |
| Fax |  |
| E-mail |  |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 1** | **Date:** |
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| **Day 2** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 3** | **Date:** |
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| **Day 4** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 5** | **Date:** |
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| **Day 6** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 7** | **Date:** |
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| **Day 8** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 9** | **Date:** |
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| **Day 10** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 11** | **Date:** |
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| **Day 12** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 13** | **Date:** |
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| **Day 14** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 15** | **Date:** |
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| **Day 16** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 17** | **Date:** |
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| **Day 18** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Name Surname** |  |
| **Programme** |  |

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| **Day 19** | **Date:** |
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| **Day 20** | **Date:** |
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| **Authorized Person** | **Department Internship Coordinator** |
| **Date / Signature** | **Date / Signature** |

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| **Student’s Own Evaluation and Comments on His/Her Internship** |
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| **Student’s**  **Name&Surname**  **Date - Signature** | **\_\_\_/\_\_\_/\_\_\_\_\_\_\_** |

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| **1. STURCTURE OF THE INSTITUTION/CORPORATION** |
| 1. Mission, Vision, Targets, Policies |
| 1. Information of the field of acticity |
| 1. The position of the institution/corporation within the sector (competitors, market share etc.) |
| **2. ACTIVITIES DURING THE INTERNSHIP PROCESS** |
| 1. Information on the department where the internship took place |
| 1. The hierarchical structure of the department and the student’s position in this hierarchy |
| 1. Measurement and evaluation of the department’s performance |
| **3. THE ANALYSIS OF THE INTERNSHIP PROCESS** |
| 1. Objectives before the beginning of the internship |
| 1. Discussion on the relationship between the curriculum and the internship practice, and other related issues |
| 1. Thoughts and suggestions on the general process of the internship |