****

**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
 |