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# HALİÇ UNIVERSITY FACULTY OF ENGINEERING

**DEPARTMENT OF MECHANICAL ENGINEERING**

SUMMER TRAINING REPORT

PHOTOGRAPH

### STUDENT NAME-SURNAME:

**STUDENT ID NUMBER:**

**SUMMER TRAINING COURSE ID:**

**ACADEMIC YEAR:**

**DATES OF TRAINING:**

5. Levent Mahallesi, 34060 Eyüpsultan/İstanbul, Phone: (0 212) 924 24 44 | Call Center: 444 25 42, Fax: (0 212) 999 78 52, [www.](http://www/) halic.edu.tr, E-mail: [info@halic.edu.tr](mailto:info@halic.edu.tr)

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# HALİÇ UNIVERSITY FACULTY OF ENGINEERING

## DEPARTMENT OF MECHANICAL ENGINEERING SUMMER TRAINING GUIDE

### Purpose, Scope and Basis

**1**- The purpose of this manual is to establish the procedures and principles to be followed in summer training for mechanical engineering students depending on their periods of study.

The content and scope of the summer training which is mandatory for students to apply the skills and information they have acquired in their undergraduate studies, is determined by the Board of the Department of Mechanical Engineering, and the conduct of the summer training is guided by the principles stated in this manual.

This manual has been prepared following the Halic University Internships/Summer Training Instructions and the curriculum introduced by the Haliç University Engineering Faculty Mechanical Engineering Department.

**Commission of Summer Training**

**2**- The Summer Training Commission consist of three faculty members, at least one of whom shall be a member of the faculty and shall be appointed by the department chair for one academic year. Commission members whose terms expire may be reappointed.

The responsibilities of the commission are as follows:

1. Announce summer training opportunities from the public and private sectors to students.
2. Assisting students in finding summer training.
3. Distributing summer training opportunities from the public and private sectors and the University to students.
4. Reviewing summer training that is found by students using their perceptions in terms of suitability, to accept or reject.
5. Updating the Summer Training Guide to meet requirements; preparing the guide with the approval of the department chair and dean's office and announcing or sharing it electronically on the department website to the students who will begin their training.
6. Organize a meeting with students by the end of March each year to inform them of the summer training guidelines and application principles and answer their questions.
7. If necessary, visit some companies during the summer training period and supervise students’ work.
8. Receiving reports, examining, and evaluating them in terms of competence, acceptance, or rejection.

### Time and Duration

**3**- Summer training is conducted during the summer vacation following the spring semester by the Mechanical Engineering Education and Training Program. To graduate, students must complete at least 60 working days of summer training.

Summer training is divided into two semesters. A training period consists of **at least 30 working days**. The first training can be completed at the end of the 4th semester (2nd year) and the grade will be recorded as “Successful” or “Unsuccessful” under the course “**MEC311 Summer Training I**” in the 5th semester in the curriculum. The second training can be completed at the end of the 6th semester (3rd year) and the grade will be recorded as “Successful” or “Unsuccessful” under the course **“MEC407 Summer Training II”** in the 7th semester in the curriculum.

### Beginning of Summer Training

**4**- The student should complete “MEC311 Summer Training I” during the summer following the completion of the 2nd year and select the appropriate course in the fall semester of the 3rd year. He/she should take the course “MEC407 Summer Training II” in the summer following the completion of the 3rd year and select the relevant course in the fall semester of the 5th year. It is also possible for the student to complete his/her training in the future.

The student is obliged to apply to the Internship Coordinator's Office at least one month before the start date of the training with the “Compulsory Summer Training Form”, which includes his/her identity information, information about the company where he/she will do the training, the start and completion dates of the training, and the approval of the Chairman of the Summer Training Commission and the Dean of the Faculty.

### [Compulsory Attendance](https://tureng.com/tr/turkce-ingilizce/compulsory%20attendance)

**5**- Attendance is compulsory in summer training. If the company terminates the training of the student who does not go to work for three days without an excuse and does not attend for a total of five days in a training period and notifies the University, the student's course is dismissed. Attendance status is monitored in the attendance chart in the summer training guide and approved by the authorized supervisor of the company with signature and stamp. If the training duration is less than 80% in total in terms of days and hours, only the number of working days that the student has attended is counted as training duration.

### Training Company and Change of the Company

**6**- Summer training is carried out in domestic or foreign public or private sector organizations which are approved by the Summer Training Commission. Students are preferred to do training in workplaces with more than 30 employees.

It is essential for students to find their training companies on their own it is required to be approved their training companies by the Committee. The Summer Training Commission guides students in finding a training company.

If the student determines that the company where he/she is doing training is not suitable in terms of profession, he/she requests a change of training company by notifying the Summer Training Commission in writing together with the documents proving this. If the student's application is approved, the training company may be changed.

### Repetition of Summer Training and Completion of the Missing Days

**7-** Students who do not complete their training or whose training is evaluated as unsuccessful by the Summer Training Commission must renew their courses. The missing time due to any acceptable reason must be completed in the following semesters. If only the missing working days are to be completed, the training can also be completed on the vacation days following the fall semester for the missing days. Students should not be registered in any course during their training days.

### Compliance with Company Rules

**8**- Students are obliged to comply with all kinds of regulations such as the statute and regulations of the company related to the public or private sector, and the rules regarding discipline and occupational safety. Students cannot participate in demonstrations, marches, slowdowns, and strikes in their workplaces and they cannot participate in such actions.

### Social Security and Accident Insurance

**9**- Students can start their training only after their "Work Accident and Occupational Disease Insurance" entries are completed. Students must submit 1 passport-size photograph, 1 copy of their ID card, and 1 copy of their student ID card to the Internship Coordinator's Office along with the summer training form and start the insurance process. Following the 5510 numbered "Social Insurance and General Health Insurance Law" The beginning and notification obligation will be made by our University. Insurance costs are paid by the university.

The work done in the company without insurance entries is not counted from the training period and the University cannot be held responsible for the problems that may arise during this period.

### Summer Training Report

**10-** The Summer Training Commission prepares a guideline for the students and publishes it electronically on the department web page. The student performs all training procedures according to the guidelines, forms, and principles in this book and fills this book. The supervisor of the company checks, signs, and stamps the daily work reports and the attendance chart filled in by the student in the summer training report; he/she also makes evaluations regarding the student's attendance, interest, success, and other situations on the "Student Evaluation Form". The authorized person sends this form **in a sealed envelope signed and stamped** with the student by hand or by registered mail or by courier to the Commission until the end of October of that year at the latest.

The summer training report is examined by the Summer Training Commission. Courses that are deemed unsuccessful may be canceled partially or completely by the decision of the Commission.

### Other Provisions

**11–** The provisions of "Haliç University Associate and Undergraduate Education and Examination Regulations" and "Higher Education Institutions Student Discipline Regulations" shall apply to matters not regulated in this guide.

### Execution

**12 –** This guideline is executed by the Head of the Mechanical Engineering Department.

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## HALİÇ UNIVERSITY FACULTY OF ENGINEERING

### DEPARTMENT OF MECHANICAL ENGINEERING

### SUMMER TRAINING PRINCIPLES

1. **Objective**

The purpose of the Summer Training Principles is to explain the details of the principles stated in the Summer Training Guideline in the previous section, and the relevant forms and methods.

### The Process of Starting a Summer Training

Each student who will do training, at least one month before the start date of the training, fills in the identity information on the *cover letter*, "*Haliç University Compulsory Summer Training Form*" and "*Student Acceptance Form*" attached to this section, has it signed by the Head of the Department and takes to the internship officer of the company where he/she wants to do training.

The student submits the Student Acceptance Form to the Summer Training Commission by having it signed and stamped after having it filled in by the training officer at the company.

The process for filling and running the Summer Training Form is explained below in steps:

* 1. The student fills in the blank in the text section and the identity information in the following two sections (Student and Company Information), 3 copies of the Compulsory Summer Training Form, and has it signed by the Head of the Department.
  2. After the "*Training Company*" and "*Employer*" parts of the form are filled in the company where the training will take place, it is signed and stamped by the supervisor and a copy is left to the supervisor.
  3. The student signs his/her place in all copies wet and has it approved by the Summer Training Commission and the Dean of the Faculty.
  4. The student submits *3 copies of the approved form, 1 passport-size photograph, 1 copy of the ID card, and 1 copy of the student ID card* to the Internship Coordination Office for insurance entry.
  5. In case of emergency, the student must follow up with the Internship Coordinator's Office whether the insurance entry has been made or not. For the student to start the training, it is a legal obligation that the "Work Accident and Occupational Disease Insurance" entry has been made. For this reason, the documents specified in option "d" must be submitted to the Internship Coordinator's Office at least 10 days in advance.
  6. The student submits one copy of the form to the Summer Training Commission after receiving the "*insurance entry certificate*" and two copies of the "*compulsory summer training form*" from the Internship Coordinator's Office. On the training start date, the student submits the insurance entry document and a copy of the compulsory summer training form to the company and starts the training.
  7. At the end of the training, the student substitutes the last copy of the wet signed Compulsory Summer Training Form in the summer training report instead of the blank form.

### Content of the summer training

#### MEC 311 Summer Training I

The purpose of the Summer Training I at the end of the second year is to familiarize the student with the production environment, to learn the production processes and stages, and to observe and gain experience in business and professional life in such a real working environment.

This training should be carried out in an industrial company that produces materials, manufactures tools, equipment, and machinery; in addition, **an engineer** must be working in the basic unit where the training will be carried out.

In this training, emphasis is placed on mechanical engineering practices in production, manufacturing, maintenance and repair workshops. Accordingly, **the work expected from the students** in the training should cover the answers to the questions given below:

* + 1. Collect and provide the following information about the company:
       1. Company name and address,
       2. A very brief history of the company,
       3. Vision, mission, and purpose of the company,
       4. The number of employees according to the departments (also the number of workers, technicians, engineers, administrative personnel, etc. in production and manufacturing departments),
    2. Drawing the layout plan of the facility
    3. Examination and explanation of basic production or workshop processes and operations
    4. Preparation of the workflow chart for the production made in the company
    5. Consequently, making a general evaluation of the training and stating the contributions of this training to the student in mechanical engineering education and training

#### MEC407 Summer Training II

The purpose of the training at the end of the third year is to enable mechanical engineering students to gain experience in using the basic mechanical engineering knowledge and skills they have acquired in their courses and first training in the upper and middle management of companies. Another benefit of this training is that it enables students to gain knowledge about the use of information systems and technologies in the management processes of companies.

Internship should be done under the supervision of **an engineer** in maintenance workshops, R&D and project design departments, production planning, purchasing, sales and marketing, quality control, and logistics departments of factories or large companies.

Accordingly, the work expected from the students in the training should cover the answers to the questions given below:

* + 1. All questions that were expected to be answered in the previous training should be taken into consideration in this training in light of the mechanical engineering courses taken in the third year. In particular, questions that could not be answered or were missing in the first training should also be addressed in this training.
    2. Information about strategic planning and strategic management applied in the company.
    3. Brief information about the company's Quality Management System or quality control activities.
    4. Brief information about the computer hardware and software program used in the company.

### Writing the Summer Training Report

* 1. The tasks, studies, impressions, and observations made **for each day** during the training are filled in one or more pages of the summer training report by writing the date, the relevant department, the name and surname of the student, and the necessary signatures are **signed and stamped.**
  2. **At least one report page** must be filled in for each working day of the training. In addition,

**75% of at least one page** of the daily report should be filled with text.

* 1. If the summer training report is not sufficient, it could be copied sufficiently from the daily form pages and added to the report.
  2. A general report introducing the company, its products, departments, layout, and its work in the field of mechanical engineering must be prepared and placed in the report.
  3. The report should be **computer-typed** (Microsoft Word). General Text should used with 12 point Times New Roman, justified and spacing single line rules.
  4. Technical language should be used in report writing (3rd person passive). Images, technical drawings, calculations, reports, etc. related to the work done should be attached as evidence.

### Submission of the Summer Training Report

The student prepares the training file containing the work he/she has done (including the student acceptance form, the summer training report and its annexes, the signed and stamped student evaluation form in the envelope, the cover of which is filled and affixed by the staff responsible from the training) and submits it to the Summer Training Commission **until the end of October of that year**. For the students done outside the summer period, the summer training reports are submitted at the end of the training.

### Evaluation and Acceptance of Summer Training

The training is evaluated by the commission within two months at the latest. The list showing the success status of the students is entered into the automation system as "**Successful**" or "**Unsuccessful**" as MEC311 Summer Training I at the end of the 5th semester and MEC407 Summer Training II at the end of the 7th semester by the head of the summer training commission after obtaining the approval of the department head.



### HALİÇ UNIVERSITY FACULTY OF ENGINEERING

**DEPARTMENT OF MECHANICAL ENGINEERING**

Subject: Summer Training ….. /….. /……..

Dear Colleague,

Our country, which is in the process of the European Union, needs to make a breakthrough in the field of science and engineering to the set goals and ensure sustainable socioeconomic development by increasing its competitiveness at the international level. In addition to basic and social sciences, especially mechanical engineering has an important place in achieving this goal. Considering this perspective, Haliç University aims to contribute to the training of engineers and researchers for industrial applications.

The purpose of the training is to enable students to get to know the workplaces related to their professions and to increase their knowledge and experience about professional practices by observing the working order, organizational structure, work discipline, and social relations in the workplaces where they will do training to consolidate the theoretical knowledge and skills they have gained during their education period. In addition, to gain the ability to use the theoretical knowledge they have received and transfer it to practice, to learn to work in harmony with the staff of the company where they do their training, and to gain the habit of following technological developments in the field of profession.

For Haliç University Faculty of Engineering, Department of Mechanical Engineering students to graduate, they are required to complete a total of 60 working days of training, 30 working days each in the 2nd and 3rd grades. We believe that the interest you will show in this regard and the training opportunities you will provide will greatly contribute to our student’s professional growth.

Therefore, we thank you for your support and contributions.

…………………………………

Head of Mechanical Engineering Department

5. Levent Mahallesi, 34060 Eyüpsultan/İstanbul, Phone: (0 212) 924 24 44 | Call Center: 444 25 42, Fax: (0 212) 999 78 52, [www.](http://www/) halic.edu.tr, E-mail: [info@halic.edu.tr](mailto:info@halic.edu.tr)



**HALİÇ ÜNİVERSİTESİ**

**MÜHENDİSLİK FAKÜLTESİ**

**MAKİNE MÜHENDİSLİĞİ BÖLÜMÜ**

Konu: Öğrenci Stajı ….. /…./……..

Sayın Meslektaşımız,

Avrupa Birliği sürecindeki ülkemizin, belirlenen hedeflere ulaşabilmesi için bilim ve mühendislik alanında atılım yapması ve uluslararası düzeyde rekabet gücünü artırarak sürdürülebilir bir sosyo-ekonomik gelişme sağlaması gerekmektedir. Bu amaca ulaşmada, temel ve sosyal bilimlerin yanı sıra özellikle makine mühendisliği önemli bir yer tutmaktadır. Bu perspektifi göz önüne alan Haliç Üniversitesi, endüstriyel uygulamalar için mühendis ve araştırmacı insan yetiştirilmesine katkıda bulunmayı hedeflemektedir.

Stajın amacı; öğrencilerin meslekleriyle ilgili işyerlerini tanımalarını sağlamak ve öğrenim süreleri içinde aldıkları teorik bilgi ve kazandıkları becerileri sağlamlaştırmak için staj yapacakları işyerlerindeki çalışma düzenini, organizasyon yapısını, iş disiplinini ve sosyal ilişkileri gözlemleyip verilen görevleri yaparak mesleki uygulamalara yönelik bilgi ve görgülerini arttırmaktır. Buna ek olarak, almış oldukları teorik bilgileri kullanabilme ve uygulamaya aktarma becerisini kazanmalarını, staj yaptıkları kurumun görevli elemanları ile uyumlu çalışmayı öğrenmelerini ve meslek alanındaki teknolojik gelişmeleri takip etme alışkanlığı kazanmalarını sağlamaktır.

Haliç Üniversitesi Mühendislik Fakültesi Makine Mühendisliği Bölümü öğrencilerinin mezun olabilmeleri için 2. ve 3. sınıflarda 30’ar işgünü olmak üzere, toplam 60 işgünü staj yapmış olmaları gerekmektedir. Bu hususta göstereceğiniz ilgi ve sağlayacağınız staj olanaklarının öğrencimizin mesleki alanda yetişmelerine büyük katkı yapacağına inanıyoruz.

Bu nedenle vereceğiniz destek ve sağlayacağınız katkılar için teşekkür ederiz. Saygılarımla,

……………………….

Makine Mühendisliği Bölüm Başkanı

5. Levent Mahallesi, 34060 Eyüpsultan/İstanbul, Telefon: (0 212) 924 24 44 | Çağrı Merkezi: 444 25 42, Fax: (0 212) 999 78 52, [www.](http://www/) halic.edu.tr, E-mail: [info@halic.edu.tr](mailto:info@halic.edu.tr)

 **HALİÇ UNIVERSITY**

**FACULTY OF ENGINEERING**

**DEPARTMENT OF MECHANICAL ENGINEERING**

**Compulsory Summer Training Form**

**To Whom It May Concern,**

The students at the department/program of............................................................................................................ at our university are obliged to do a internship/ summer training at companies and businesses before the end of their study period as the necessity of our educational programs.

In case the student who is subjected to internship/summer training is accepted to your company, our university will be responsible for rating and notifying his / her insurability law no 5510 " Social Insurances and General Health Insurance Law".

Thanks for your concern in the internship/summer training of our student, whose information is given below, in your company for working days and we wish you success.

HEAD OF THE DEPARTMENT /PROGRAM

**STUDENT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| ID Number |  | Academic Year |  |
| First Name |  | Student ID Number |  |
| Last Name |  | Place of Birth |  |
| Father's Name |  | Date of Birth |  |
| Mother's name |  | E-mail address |  |
| Nationality |  | Phone Number |  |
| Residence Address |  | | |

**COMPANY WHERE THE INTERNSHIP / SUMMER TRAINING IS DONE**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name |  | | | | | | |
| Address |  | | | | | | |
| Production / Service Area |  | | Risk Range | |  | | |
| Phone Number |  | | Fax Number | |  | | |
| E-mail address |  | | Website address | |  | | |
| Starting date of Internship / Summer Training | …….. / ……. / ..… | End date of Internship / Summer Training | | …….. / ……. / ..… | | Duration of Internship / Summer Training |  |
| **NOTE: Internship / Summer Training starting and end date should be written by calculating midterm exams, final exams, official-religious holidays, and weekend** | | | | | | | |

**EMPLOYER OR HIS/ HER DEPUTY**

|  |  |  |  |
| --- | --- | --- | --- |
| First and Last Name |  | Signature/ Stamp |  |
| Position or Title |  |
| E-mail address |  |
| Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **STUDENT'S SIGNATURE** | **APPROVAL OF DEPARTMENT/**  **PROGRAM** | **APPROVAL OF FACULTY**  **/VOCATIONAL SCHOOL** | **APPROVAL** |
| I declare that the information on the document is correct, and I respectfully submit to the preparation of the internship / summer training documents related to the aforementioned institution / company that I undertake to do internship / professional practice. | **Head of Commission of Internship / Summer Training of Department / Program**  First Name-Last Name / Title/ Stamp-Signature | **Internship / Summer Training**  **Faculty Coordinator**  First Name-Last Name / Title/ Stamp-Signature | **University Internship /Summer Training Coordinator**  The entry process to start training/summer training has been made to the Social Security Institution. |
| Date: ….… / / 202… | Date: ….… / / 202… | Date: ….… / / 202… | Date: ….… / / 202… |

**IMPORTANT NOTE 1: This document is prepared in 3 copies (not photocopy). After the approval of the Internship / Summer Training place and the approval of the Department / Program, at least 10 days before the start of the internship/summer training, it must be submitted to the Internship / Summer Training Coordinatorsiph with 1 photocopy of ID, 1 photocopy of student ID and 1 passport-sized photo.**

**IMPORTANT NOTE 2: All 3 documents must be filled in with a blue pen, and all 3 documents must be signed and stamped.**

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**HALİÇ ÜNİVERSİTESİ**

**ZORUNLU STAJ / MESLEKİ UYGULAMA FORMU**

**İlgili Makama,**

Üniversitemiz ......................................................Fakültesi / Yüksekokulu Bölümü / Programı

öğrencilerinin, Eğitim - Öğretim programlarımız gereği öğrenim süresi sonuna kadar, kuruluş ve işletmelerde staj / mesleki uygulama yapma zorunluluğu bulunmaktadır.

Staja / mesleki uygulamaya tâbi tutulan öğrencimizin stajını / mesleki uygulamasını kuruluşunuzda yapmasının kabul edilmesi durumunda, 5510 sayılı "Sosyal Sigortalar ve Genel Sağlık Sigortası Kanunu" gereği sigortalının başlangıcı ve bildirim yükümlülüğü Üniversitemiz tarafından yapılacaktır.

Aşağıda bilgileri yer alan öğrencimizin stajını / mesleki uygulamasını iş günü süreyle kuruluşunuzda yapmasında göstereceğiniz

ilgiye teşekkür eder, çalışmalarınızda başarılar dileriz.

......................................................................

*\* Sayfa sonundaki notları okuyunuz!* BÖLÜM / PROGRAM BAŞKANI

**ÖĞRENCİNİN BİLGİLERİ**

|  |  |  |  |
| --- | --- | --- | --- |
| T.C. Kimlik Numarası |  | Öğretim Yılı |  |
| Adı |  | Öğrenci Numarası |  |
| Soyadı |  | Doğum Yeri |  |
| Baba Adı |  | Doğum Tarihi |  |
| Ana Adı |  | E-Posta Adresi |  |
| Uyruğu |  | Telefon Numarası |  |
| İkametgah Adresi |  | | |

**ÖĞRENCİNİN SAĞLIK DURUMU (ZORUNLU ALAN)**

|  |  |  |
| --- | --- | --- |
| SPAS Müstehaklık Sorgulama (Sağlık Provizyon Aktivasyon Sistemi) (E-DEVLET SİSTEMİ ÜZERİNDEN BAKILACAK) | Müstehaktır, Provizyon alabilir (Sağlık Hizmetinden Faydalanabilir) |  |
| Müstehak Değildir, Provizyon alamaz (Sağlık Hizmetinden Faydalanamaz) |  |
| Yeşil Kart (Staj Koordinatörlüğü'ne bilgi verilmelidir.) |  |

**STAJ / MESLEKİ UYGULAMA YAPILAN YERİN**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Adı |  | | | | | | |
| Adresi |  | | | | | | |
| Üretim / Hizmet Alanı |  | | Risk Aralığı | |  | | |
| Telefon Numarası |  | | Fax Numarası | |  | | |
| E-Posta Adresi |  | | Web Adresi | |  | | |
| Staja / Mesleki Uygulamaya Başlama Tarihi | …….. / ……. / 202… | Staj / Mesleki Uygulama Bitiş Tarihi | | …….. / ……. / 202… | | Staj / Mesleki Uygulama Süresi (gün) |  |
| **NOT: Staj / Mesleki Uygulama başlama ve bitiş tarihleri, ara sınav, final sınavları, resmi - dini tatiller ve haftasonu tatilleri hesaplanarak yazılmalıdır.** | | | | | | | |

**İŞVEREN VEYA VEKİLİNİN**

|  |  |  |  |
| --- | --- | --- | --- |
| Adı Soyadı |  | İmza / Kaşe |  |
| Görev ve Unvanı |  |
| E-Posta Adresi |  |
| Tarih |  |

**ÖĞRENCİNİN İMZASI BÖLÜM / PROGRAM ONAYI**

**FAKÜLTE / YÜKSEKOKUL ONAYI**

**ONAY**

|  |  |  |  |
| --- | --- | --- | --- |
| Belge üzerindeki bilgilerin doğru olduğunu bildirir, staj / mesleki uygulama yapacağımı taahhüt ettiğim adı geçen kurum/firma ile ilgili staj / mesleki uygulama evraklarının hazırlanmasını saygılarımla arz ederim. | **Bölüm / Program Staj / Mesleki Uygulama Komisyon Başkanı**  Adı Soyadı / Unvanı / Kaşe - İmzası | **Fakülte / Yüksekokul Staj /Mesleki Uygulama Koordinatörü**  Adı Soyadı / Unvanı / Kaşe - İmzası | **Üniversite Staj / Mesleki Uygulama Koordinatörlüğü**  Sosyal Güvenlik Kurumuna staja / mesleki uygulamaya başlama giriş işlemi yapılmıştır. |
| Tarih: ….… / / 202… | Tarih: ….… / / 202… | Tarih: ….… / / 202… | Tarih: ….… / / 202… |

**ÖNEMLİ NOT 1: Bu belge 3 adet olarak (fotokopi değil) hazırlanır. Staj / Mesleki Uygulama yeri onayından ve Bölüm / Program onayından sonra staja / mesleki uygulamaya başlama tarihinden en az 10 gün önce, 1 adet kimlik fotokopisi, 1 adet öğrenci kimlik fotokopisi ve 1 adet vesikalık fotoğraf ile birlikte Staj / Mesleki Uygulama Koordinatörlüğü'ne teslim edilmesi zorunludur.**

**ÖNEMLİ NOT 2: 3 belge de mavi kalemle doldurulmalı, 3 belge de imzalanmalı ve kaşelenmelidir.**



**HALİÇ UNIVERSITY**

**FACULTY OF ENGINEERING**

**DEPARTMENT OF MECHANICAL ENGINEERING**

**STUDENT ACCEPTANCE FORM**

…………………………………… (student name), a student in the Department of Mechanical Engineer at Haliç University is going to perform his/her training in ……………………… (company) ………………….. department between .... /…. /20.… and …. /.... /20….

Kindly submitted for your information.

**EMPLOYER OR HIS/ HER DEPUTY:**

|  |  |
| --- | --- |
| NAME SURNAME | :...................................................................................................................... |
| POSITION | :...................................................................................................................... |
| DATE | :...................................................................................................................... |
| STAMP AND SIGNATURE |  |

5. Levent Mahallesi, 34060 Eyüpsultan/İstanbul, Phone: (0 212) 924 24 44 | Call Center: 444 25 42,

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**HALİÇ UNIVERSITY**

**FACULTY OF ENGINEERING**

**DEPARTMENT OF MECHANICAL ENGINEERING**

**SUMMER TRAINING ATTENDANCE SHEET**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **NAME AND SURNAME OF STUDENT** | | | **DEPARTMENT(S) OF TRAINING** | | |
|  | | |  | | |
| **DAY** | **DATE** | **NAME, SURNAME AND SIGNATURE OF THE EMPLOYER** | **DAY** | **DATE** | **NAME, SURNAME AND SIGNATURE OF THE EMPLOYER** |
| 1 | ..../..../........ |  | 16 | ..../..../........ |  |
| 2 | ..../..../........ |  | 17 | ..../..../........ |  |
| 3 | ..../..../........ |  | 18 | ..../..../........ |  |
| 4 | ..../..../........ |  | 19 | ..../..../........ |  |
| 5 | ..../..../........ |  | 20 | ..../..../........ |  |
| 6 | ..../..../........ |  | 21 | ..../..../........ |  |
| 7 | ..../..../........ |  | 22 | ..../..../........ |  |
| 8 | ..../..../........ |  | 23 | ..../..../........ |  |
| 9 | ..../..../........ |  | 24 | ..../..../........ |  |
| 10 | ..../..../........ |  | 25 | ..../..../........ |  |
| 11 | ..../..../........ |  | 26 | ..../..../........ |  |
| 12 | ..../..../........ |  | 27 | ..../..../........ |  |
| 13 | ..../..../........ |  | 28 | ..../..../........ |  |
| 14 | ..../..../........ |  | 29 | ..../..../........ |  |
| 15 | ..../..../........ |  | 30 | ..../..../........ |  |

NAME OF THE EMPLOYER OR HIS/ HER DEPUTY:

SIGNATURE AND STAMP:

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** HALİÇ UNIVERSITY**

**FACULTY OF ENGINEERING**

**DEPARTMENT OF MECHANICAL ENGINEERING**

**STUDENT EVALUATION FORM**

(This will be filled in after the training by the employer in the institution/company in which the training will be performed)

**Student Name, Surname: Institution/Company Name:**

**Department of Student: Department of the Training:**

**Class of Student: Duration (Start-End Date):**

**Number of Students: Total Number of Employees in the Department:**

Please evaluate the performance of our student, who has done training in your company/institution, within the framework of the following criteria. The employer's views on this matter will be taken as the basis for the evaluation.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **EVALUATION CRITERIA/**  **DEĞERLENDİRME KRİTERLERİ** | **EXCELLENT/**  **ÇOK İYİ** | **GOOD/**  **İYİ** | **SATISFACTORY/**  **YETERLİ** | **UNSATISFACTORY/**  **YETERSİZ** | **POOR/**  **ZAYIF** | **NOT OBSERVED/**  **GÖZLENMEDİ** |
| PROFESSIONAL KNOWLEDGE/MESLEKİ BİLGİSİ |  |  |  |  |  |  |
| MOTIVATION/MOTİVASYONU |  |  |  |  |  |  |
| ABILITY TO APPLY KNOWLEDGE/BİLGİLERİNİ UYGULAMA BECERİSİ |  |  |  |  |  |  |
| USE OF INITIATIVE / İNSİYATİF KULLANABİLMESİ |  |  |  |  |  |  |
| QUALITY OF WORK /YAPTIĞI İŞLERİN KALİTESİ |  |  |  |  |  |  |
| CORPORATE ENVIRONMENTAL BEHAVIOR /KURUM ORTAMINA UYGUN DAVRANIŞI |  |  |  |  |  |  |
| RESPONSIBILITY/ SORUMLULUK ÜSTLENME YETENEĞİ |  |  |  |  |  |  |
| INCLINED TO TEAMWORK AND DIVISION OF LABOR/ TAKIM ÇALIŞMASINA VE İŞ  BÖLÜMÜNE YATKINLIK |  |  |  |  |  |  |
| ATTENDANCE TO WORK/İŞE DEVAMLILIĞI |  |  |  |  |  |  |

|  |  |
| --- | --- |
| OVERALL EVALUATION/ GENEL DEĞERLENDİRME | 🞏 SUFFICIENT/YETERLİ 🞏INSUFFICIENT/YETERSİZ |
| WOULD YOU CONSIDER HIRING HIMSELF/HERSELF? /  İLERİDE KENDİSİ İLE ÇALIŞMAYI DÜŞÜNÜR MÜSÜNÜZ? | 🞏 YES/EVET  🞏 NO/HAYIR |

**Additional Evaluation (If any aspects of our student need to be improved, deficient, sufficient, or successful, please specify) ---------------------------------------------------------------------------------------------------------**

|  |  |
| --- | --- |
| **APPROVAL OF THE EMPLOYER OR HIS/ HER DEPUTY** | |
| Department Name |  |
| Name and Surname of the Employer |  |
| Signature and Stamp |  |
| Date |  |

**ımportant note: ThIS FORM IS CONFIDENTIAL, IT IS REQUESTED TO SEND IT IN A CLOSED ENVELOPE, WITH THE COVER PART SIGNEd.**



**HALİÇ UNIVERSITY**

**FACULTY OF ENGINEERING**

**DEPARTMENT OF MECHANICAL ENGINEERING**

**INSTITUTION/COMPANY EVALUATION FORM**

**(**This will be filled in after the training by the student)

**1-STUDENT INFORMATION**

|  |  |
| --- | --- |
| STUDENT NAME, SURNAME |  |
| NAME AND THE ADDRESS OF THE COMPANY/INSTITUTION |  |
| SECTOR OF THE COMPANY |  |
| NUMBER OF TOTAL ENGINEERS |  |
| NUMBER OF MECHANICAL ENGINEERS |  |
| NUMBER OF TOTAL EMPLOYEES |  |
| DURATION OF TRAINING (WORKDAYS) |  |

**2-SCOPE OF THE TRAINING**

|  |  |
| --- | --- |
| PRODUCTION (MANUFACTURING, ATELIER) |  |
| PRODUCTION PLANNING AND CONTROL |  |
| PRODUCT DEVELOPMENT |  |
| PURCHASING |  |
| SUPPLY CHAIN |  |
| LOGISTIC |  |
| QUALITY CONTROL |  |
| MAINTENANCE |  |
| HUMAN RESOURCE |  |
| MARKETING |  |
| FINANCE AND ACCOUNTING |  |
| INFORMATION TECHNOLOGIES |  |
| OTHER |  |

**3- COMPANY EVALUATION**

|  |  |  |
| --- | --- | --- |
| IS THERE R&D IN THIS COMPANY? | yes | no |
| IS THERE A NEED FOR A MECHANICAL ENGINEER IN THIS COMPANY? | yes | no |
| WOULD YOU RECOMMEND THE COMPANY TO YOUR FRIENDS? | yes | no |
| WOULD YOU WANT TO WORK AT THIS COMPANY AFTER YOUR  GRADUATION**?** IF YOUR ANSWER IS NO, BRIEFLY EXPLAIN WHY?  …………………………………………………………………………………… | YES | NO |



**HALİÇ UNIVERSITY**

**FACULTY OF ENGINEERING**

**DEPARTMENT OF MECHANICAL ENGINEERING**

**SUMMER TRAINING COMMISSION EVALUATION FORM**

**(**This will be filled in after the training by the committee)

|  |  |
| --- | --- |
| Student name, surname |  |
| class and Student number |  |
| department |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Evaluation Criteria** | **EXCELLENT** | **GOOD** | **ACCEPTABLE** | **INSUFFICIENT** |
| Proper use of the guideline |  |  |  |  |
| Effectiveness of daily reports |  |  |  |  |
| Compliance of the training with the content |  |  |  |  |
| The student's evaluation of the company |  |  |  |  |
| Company or Employer Evaluation |  |  |  |  |

**Committee Member Committee Member**

Name Surname: Name Surname:

Signature/Date: Signature/Date:

**Number of Accepted Working Days:** …………...

**Success Status:** ..................................

A) ACCEPTED for ……. working days. B) NOT ACCEPTED.

**Approval of the Head of the Mechanical Engineering Department:**

**Name and Surname: Signature:**

**Date:**

|  |  |
| --- | --- |
| Department of Training: | Date: |
|  | |
| Signature of Student: | Signature of the Staff Responsible for Training:  Name Surname:  Stamp: |
| **HALİÇ UNIVERSITY FACULTY OF ENGINEERING**  **MECHANICAL ENGINEERING DEPARTMENT** | |