**Staj Programı**

**Training Program**

Defter No. ………………………

Diary Book No.

**Soyadı Adı :**

**Surname, name :**

**Bölümü, Öğrenim Yılı :**

**Dept. training year :**

**YAPILAN PRATİK**

**ACCOMPLISHMENTS**

|  |  |  |  |  |  |
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| Müessese ve iş yeri  Name and place of work | Kısım  Department | İşe Başlama  Tarihi  Starting  Date | Ayrıldığı  Tarih  Completion  Date | Çalışmadığı  Günler  Nonworking  Days | Çalıştığı  Günler  Working  Days |
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| GENERAL REPORT |
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| \_\_ / \_\_ / \_\_\_\_ Tarihinden \_\_ / \_\_ / \_\_\_\_ Tarihine kadar bir haftalık çalışma  From \_\_ / \_\_ / \_\_\_\_ To \_\_ / \_\_ / \_\_\_\_ Weekly Service   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **GÜN** DAYS | YAPILAN İŞLER **WORK ACCOMPLISHED** | **Yaprak No**  **Page Numb.** | **SAAT**  **HOURS** | | | PAZARTESİ **MONDAY** |  |  |  |  | |  |  |  | |  |  |  | | **SALI**  **TUESDAY** |  |  |  |  | |  |  |  | |  |  |  | | **ÇARŞAMBA**  **WEDNESDAY** |  |  |  |  | |  |  |  | |  |  |  | | **PERŞEMBE**  **THURSDAY** |  |  |  |  | |  |  |  | |  |  |  | | **CUMA**  **FRIDAY** |  |  |  |  | |  |  |  | |  |  |  | | **CUMARTESİ**  **SATURDAY** |  |  |  |  | |  |  |  | |  |  |  | | **TOPLAM (TOTAL)** | | | | |   Ögrencinin İmzası :  Signature of traince  Çalıştığı iş yeri ve Kısmı :  Work Place  Kontrol edenin ünvanı, soyadı, adı :  Name of controlling superior  İmzası (Signature) : |

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| \_\_ / \_\_ / \_\_\_\_ Tarihinden \_\_ / \_\_ / \_\_\_\_ Tarihine kadar bir haftalık çalışma  From \_\_ / \_\_ / \_\_\_\_ To \_\_ / \_\_ / \_\_\_\_ Weekly Service   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **GÜN** DAYS | YAPILAN İŞLER **WORK ACCOMPLISHED** | **Yaprak No**  **Page Numb.** | **SAAT**  **HOURS** | | | PAZARTESİ **MONDAY** |  |  |  |  | |  |  |  | |  |  |  | | **SALI**  **TUESDAY** |  |  |  |  | |  |  |  | |  |  |  | | **ÇARŞAMBA**  **WEDNESDAY** |  |  |  |  | |  |  |  | |  |  |  | | **PERŞEMBE**  **THURSDAY** |  |  |  |  | |  |  |  | |  |  |  | | **CUMA**  **FRIDAY** |  |  |  |  | |  |  |  | |  |  |  | | **CUMARTESİ**  **SATURDAY** |  |  |  |  | |  |  |  | |  |  |  | | **TOPLAM (TOTAL)** | | | | |   Ögrencinin İmzası :  Signature of traince  Çalıştığı iş yeri ve Kısmı :  Work Place  Kontrol edenin ünvanı, soyadı, adı :  Name of controlling superior  İmzası (Signature) : | |
| KISIM:  SECTION | | Yaprak No:  Page No: | |
| Yapılan İş:  Work Done . | | Tarih:  Date | |
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