***MIDDLE EAST TECHNICAL UNIVERSITY***

# Faculty of Engineering

# Industrial Engineering Department

 ***Certified***

##  Photograph of

***Student***

# SUMMER PRACTICE PERFORMANCE REPORT

# CONFIDENTIAL

Student Name, Last Name .......................................................................

Class, Student Number .......................................................................

Name of the Organization .......................................................................

Dates .......................................................................

Minimum period of compulsory training is four weeks.

# Evaluation of Summer Practice

Department Period of Interest Attendance Performance Remarks

 Practice in Job

 (weeks)

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Grades A=Excellent Date.......................

 B=Good Name of Supervisor.............................................

 C=Fair Title of Supervisor........................................................

 D=Poor Official Stamp and Signature.......................................

 F=Unsatisfactory

Note: It is kindly requested that this document is filled in by the relevant responsible at the end of the internship of the student, then a **scanned version** of the document is sent to *ie-staj@metu.edu.tr* and the document is kept by the institution. It is also kindly asked not to send the document to another recipient.