**ÇANKAYA UNIVERSITY**

**Faculty of Engineering**

**Electrical and Electronics Engineering Department**

**Internship Evaluation Form**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Name and Surname** | |  | |  | | **Student Number** |  | |
| **Course Code** | |  | EE 200 |  | EE 300 | | | |
| **Company Name and Department** | |  | | | | | | |
| **Date** |  | | | **Duration (***in terms of workday***)** | | | | 20 |

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| --- | --- | --- | --- | --- |
| **Conditions for being satisfactory** | For each section below give grades and indicate your opinion. When you finish grading, please sum the score at the end of the form. If total score is under 60 then internship becomes unsatisfactory and must be repeated. However, if minor revisions are required skip grading and select “Revision required” check box and state the necessary changes clearly for each section in the name of accurate guidance to the student. | | | |
| **Criteria** | | | **Grade** | **Comments** |
| **1.Title and Layout of the Report** | | | **/5** |  |
| **2. Abstract** | | | **/5** |  |
| **3. Introduction** | | | **/5** |  |
| **4. Methods (Are realistic constraints and conditions of the internship taken care of ?)** | | | **/15** |  |
| **5. Experiments** | | | **/20** |  |
| **6. Results and Discussions** | | | **/10** |  |
| **7. Summary** | | | **/5** |  |
| **8. References** | | | **/5** |  |
| **9. Overall Opinion** | | | **/10** |  |
| **10. Student Evaluation Form** | | | **/20** | Student evaluation form inherits four degree of grades. “Çok iyi” equals 4 points while “Zayıf” equals 1 point. Sum all the evaluation boxes’ grades and divide by 4. Maximum summation will be 80 points. |
| **Total Grade** | | **/100** | |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Overall Evaluation** |  | X | **First Evaluation** | |  | **Second Evaluation** | |  | |  | |
|  | X | **Satisfactory** | |  | **Unsatisfactory** | |  | **Revision required** |  | |
|  |  |  |
| **Evaluator** | Dr. Sude HATEM | | | | | | **Signature** |  | | **Date** |  |
| **Internship Committee Observer** | | | | Dr. Sude HATEM |  | | **Signature** |  | | **Date** |  |