



**THE REPUBLIC OF TURKEY  
ANKARA YILDIRIM BEYAZIT UNIVERSITY  
FACULTY OF ENGINEERING AND NATURAL SCIENCES  
COMPUTER ENGINEERING DEPARTMENT**

**INTERNSHIP EVALUATION FORM**

To whom it may concern,

This form must be signed by a computer engineer.

After you fill this form, please put that form in an envelope and make sure it is closed.  
Then you can send this envelope by our student.

**Internship Commission**

**Student**

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Name and Surname: .....

Student ID: .....

**Company**

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Title: .....

Address: .....

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**Internship Dates**

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Start : ... / ... / .....

Finish : ... / ... / .....

Duration of internship: .....days

**INFORMATION ON THE STUDENT'S GENERAL BEHAVIOR**

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- 1) Discipline status:  
( ) 1. Very good ( ) 2. Good ( ) 3. Fair ( ) 4. Poor ( ) 5. No opinion
- 2) Diligence status:  
( ) 1. Very good ( ) 2. Good ( ) 3. Medium ( ) 4. Poor ( ) 5. No opinion
- 3) Relations with the employees of the organization:  
( ) 1. Very good ( ) 2. Good ( ) 3. Medium ( ) 4. Poor ( ) 5. No opinion
- 4) Attendance status:  
( ) 1. On-time every day.  
( ) 2. Has negligible absenteeism  
( ) 3. Usually absent. Absenteeism: .....day(s)
- 5) Other explanations for the student's behavior, if any:

**INFORMATION ON THE STUDENT'S GENERAL BEHAVIOR**

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- 1) Comprehension ability:  
( ) 1. Very good ( ) 2. Good ( ) 3. Medium ( ) 4. Poor ( ) 5. No opinion
- 2) Speed of completing the assigned work:  
( ) 1. Very good ( ) 2. Good ( ) 3. Medium ( ) 4. Poor ( ) 5. No opinion
- 3) The extent of meticulousness and regularity in the work:  
( ) 1. Very good ( ) 2. Good ( ) 3. Medium ( ) 4. Poor ( ) 5. No opinion
- 4) General knowledge in approaching the solution of problems:  
( ) 1. Very good ( ) 2. Good ( ) 3. Medium ( ) 4. Poor ( ) 5. No opinion
- 5) Level of programming knowledge:  
( ) 1. Very good ( ) 2. Good ( ) 3. Medium ( ) 4. Poor ( ) 5. No opinion
- 6) Has the student been useful in your organization?

**RESULT**

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Was student successful during his/her internship? ( ) Yes ( ) No  
Please give student a grade out of 100 ...../100

**Director of Internship**

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Name Surname: ..... Date: .... / .... / .....

Duty : ..... Signature: .....

The university that he / she graduated: .....

The department that he / she graduated: .....