YALOVA UNIVERSITY

**FACULTY OF ECONOMICS AND ADMINISTRATIVE SCIENCE**

**DEPARTMENT OF BUSINESS ADMINISTRATION**

**PRACTICAL TRAINING INSTITUTION OFFICIAL EVALUATION FORM**

Dear Official,

In order to evaluate the Practical Training carried out by our student in your institution, we kindly request you to fill out this form and send it to our Department Head in a closed envelope. Thank you for providing our student with the opportunity to take Practical Training in your organization and for contributing to our training program.

Regards

 Department Practical Training Coordinator

**STUDENT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Name and Surname |  | T.C. ID Number |  |
| Student Number |  | Academic Year |  |
| Department |  | Grade |  |

**PRACTICAL TRAINING INFORMATION (To be filled by the Institution)**

|  |  |  |  |
| --- | --- | --- | --- |
| Practical Training Topics |  | Starting Day of Training |  |
| Finish Day of Training |  |
| Number of Training Days | ……………. Working Days |

**PRACTICAL TRAINING PLACE INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Telephone |  |
| Address |  | e-mail address |  |
| Web address |  |

**EVALUATION OF PRACTICAL TRAINING (To be filled in by the training institution)**

|  |  |  |
| --- | --- | --- |
| **S.ID** | **The Evaluation Criteria (\*)** | **0-100** |
| 1 | Ability to complete assigned task on time |  |
| 2 | Ability to put into practice what they have learned in lessons |  |
| 3 | Desire to learn, openness to knowledge |  |
| 4 | Compliance with the Rules |  |
| 5 | Business Discipline |  |
| 6 | Selfless Work |  |
| 7 | Ability to Teamwork |  |
| 8 | Continuity Status |  |
| 9 | Communication Skill |  |
| 10 | Ability to solve problems encountered |  |
| AVERAGE GRADE (arithmetic average of grades given for 10 items) |  |

**APPROVAL OF THE PRACTICAL TRAINING INSTITUTION OFFICIAL**

|  |  |  |  |
| --- | --- | --- | --- |
| Name and Surname | Title | Profession | Signature |
|  |  |  |  |

\* Scoring will be done out of 100.

*Note: After completing this form, it can be sent to the instructor by post or by hand* ***in a closed and sealed envelope****.*