

REPUBLIC OF TURKEY BOLU ABANT İZZET BAYSAL UNIVERSITY Faculty of Engineering Department of Chemical Engineering BOLU



PRACTICE FILE

Name-Surname Class - No

Internship in his place

Training Dates

BOLU ABANT İZZET BAYSAL UNIVERSITY
Faculty of Engineering (Department of Chemical Engineering)
Golkoy Campus, 14030 BOLU
Phone:009 374 254 10 00 (4814) / Fax: 009 374 253 45 58



REPUBLIC OF TURKEY BOLU ABANT İZZET BAYSAL UNIVERSITY

Faculty of Engineering
Department of Chemical Engineering
BOLU

REPORT CONSENT FORM

| Student Name and Surname | |
|---|----------------------|
| Class/No | Student Photo |
| The name and address of the institution | |
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| Start Dates of Practice | |
| End Dates of Practice | |
| Delivery Date of the Report | |
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| Faculty Members Who Review the Report | |
| The report notes issued Successful | |
| Unsuccessful | |
| Date | |
| Signature | |
| | |



REPUBLIC OF TURKEY BOLU ABANT İZZET BAYSAL UNIVERSITY Faculty of Engineering



Department of Chemical Engineering BOLU

INTERNSHIP SUMMARY Day/Month/Year **Work Done** Day

Name of Supervisor

BOLU ABANT İZZET BAYSAL UNIVERSITY
Faculty of Engineering (Department of Chemical Engineering)
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INTERNSHIP REPORT

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R EPUBLIC OF TURKEY BOLU ABANT İZZET BAYSAL UNIVERSITY Faculty of Engineering



Department of Chemical Engineering BOLU

| Part | Date |
|-----------|------|
| Work Done | Page |
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Name of Supervisor