**SOCIAL SCIENCES UNIVERSITY OF ANKARA**

**DEPARTMENT OF PSYCHOLOGY**

 **COMPULSORY INTERNSHIP ATTENDANCE SCHEDULE**

**STUDENT’S NAME-SURNAME:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Day | Date |   | Day | Date |
| 1 |  |  | 11 |  |
| 2 |  |  | 12 |  |
| 3 |  |  | 13 |  |
| 4 |  |  | 14 |  |
| 5 |  |  | 15 |  |
| 6 |  |  | 16 |  |
| 7 |  |  | 17 |  |
| 8 |  |  | 18 |  |
| 9 |  |  | 19 |  |
| 10 |  |  | 20 |  |

The student identified above did an internship between ……/……/20… and ……/……/20… a total of ………… working days.

Workplace Authority

*(Signature – Seal)*