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| **FENERBAHÇE UNIVERSITY**  **FACULTY OF PHARMACY**  **ANNEX-5**  **INTERNSHIP ATTENDANCE CHART** |

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| Name and Surname: Student Number: |

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

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Approval of Workplace Trainer

Stamp-Signature

Note: The Attendance Chart will remain with the workplace officer throughout the internship. The student will sign the form every day he/she comes to the internship, and at the end of the internship period, the form will be approved by the authorized person and delivered to the student to be added to the file.