INTERNSHIP PLACE ACCEPTANCE FORM (FORM-2)

TR

ANKARA MEDIPOL UNIVERSITY

TO THE DEAN'S OFFICE OF THE FACULTY OF FINE ARTS, DESIGN AND ARCHITECTURE

From the students of Ankara Medipol University, Faculty of Fine Arts, Design and Architecture, Department of Gastronomy and Culinary Arts …… ID numbered., …… of, we accept him/her to work as an intern in our institution between dates ... / ... / …… - ... / ... /…… .

COMPANY OFFICIAL'S

First Name Surname :

Title :

Date :

Institution Title :

Institution Stamp :

Signature

This form must be submitted to the Secretariat of the Faculty of Fine Arts, Design and Architecture within the announced internship application dates.