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Dear Supervisor,

M.E.T.U Faculty of Architecture, Department of Architecture is greatly concerned with the synthesis of practical training with theoretical studies. An outcome of this concern is the compulsory Summer Practice courses for the first, second and third year students in the Undergraduate Program of the Department. The student has to fulfill the requirements of these courses in order to graduate with a B.ARCH Diploma.

The *Arch 390 – Summer Practice in an Architectural Office* is conducted at the end of the third year and it aims to introduce students of architecture to the milieu in an architectural office by allowing them to observe and participate in project development, relations of projects and implementation and various office procedures. The duration of the summer practice is *48 work days* and it is very important for the students to monitor different work processes during the internship.

According to the Law no. 5510 “Social Security and General Health Insurance”, a statement of employment will be issued and the premium of the *Insurance of Occupational Accidents and Professional Diseases* will be paid by the University. In order to make this happen, the student needs to be informed about the address and the exact start / finish dates of the internship at least 20 days before the commencement day of the internship.

Finally, we kindly request you to submit the *evaluation form* to the student in a sealed and signed envelope after the work period in order to complete the grading process.

I thank you in advance on behalf of our students for your invaluable contributions to the educational program of our school. With my best regards,



Prof.Dr.T. Elvan ALTAN,
Chairperson
METU, Department of Architecture



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MIDDLE EAST TECHNICAL UNIVERSITY
DEPARTMENT OF ARCHITECTURE
ANKARA – TURKEY

ARCH 390 – SUMMER PRACTICE IN AN ARCHITECTURAL OFFICE
RECORD SHEET

Name / Surname :

Class / ID no : /

Summer Internship Code : ARCH 390

Required Work Duration : 48 work days

Work Period : / / – / /

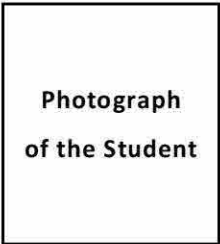
Company :

Internship Address :

County :

City :

Country :



APPROVAL OF THE WORK PLACE

We approve that the student named above will be employed as an intern in our office working days per week and between / / – / /

Name / Surname :

Title / Position :

Seal / Signature :

APPROVAL OF THE METU DEPARTMENT OF ARCHITECTURE

The student named above is approved to work as an intern in the stated architectural office between / / – / /

Name / Surname :

Title / Position :

Seal / Signature :



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MIDDLE EAST TECHNICAL UNIVERSITY
DEPARTMENT OF ARCHITECTURE
ANKARA – TURKEY

ARCH 390 – SUMMER PRACTICE IN AN ARCHITECTURAL OFFICE
ACCOMPLISHMENT SHEET
CONFIDENTIAL[#]

Student's Name / Surname :

Class / Student Number : /

Summer Practice Code : ARCH 390

Required Duration of Work : 48 work days

Dates of Work Period : / / – / /

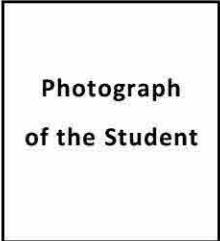
Name of the Workplace :

Address of the Workplace :

County :

City :

Country :



EVALUATION OF THE RELATED PERSON

Interest into the Work	Success	Attendance
<input type="radio"/> Excellent	<input type="radio"/> Excellent	<input type="radio"/> 48 days of attendance
<input type="radio"/> Very Good	<input type="radio"/> Very Good	<input type="radio"/> 1-2 days of absenteeism
<input type="radio"/> Good	<input type="radio"/> Good	<input type="radio"/> 3-4 days of absenteeism
<input type="radio"/> Satisfactory	<input type="radio"/> Satisfactory	<input type="radio"/> 5-6 days of absenteeism
<input type="radio"/> Unsatisfactory	<input type="radio"/> Unsatisfactory	<input type="radio"/> 7 or more days of absenteeism

Please state the exact time interval that the student have worked

..... / / – / /

Opinions:

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Name / Surname :

Work Title :

Seal / Signature :

[#]Please submit this form in a sealed and signed envelope to the student after the work period.