

By clicking on the Internship Companies box in the Internship tab of your <u>MYTEDUPORTAL</u>, you can add the institution where you will do your internship if it is not in the list.

Information Exchange

Help & Support



ര myTEDUPortal

Company \checkmark

Search			٩
Name	Sector	Status	Addition Date
A Bilgi Teknolojileri Araştırma ve Geliştirme İmalat San. ve Tic. Ltd. Şti.	Bilişim Teknolojileri (Information Technologies)	Approved	14.12.2022
Advancer Yazılım Bilgisayar Danışmanlık Ltd. Şti.	Bilişim Teknolojileri (Information Technologies)	Approved	31.05.2023
E-KALİTE YAZILIM DON. MÜH. TAS. VE İNT. HİZ. SAN. TİC. LTD. ŞTİ.	Mühendislik / Mimarlık (Engineering / Architecture)	Approved	08.03.2023
MERSİN AİLE VE SOSYAL HİZMETLER İL MÜDÜRLÜĞÜ	Sağlık ve Sosyal Hizmetler (Health and Social Services)	Approved	06.06.2023
Yüzyıl Türkiye Enstitüsü İktisadi İşletmesi	Toplumsal Hizmetler (STK) - Community Services	Approved	18.05.2023
Zafer Taahhüt, İnşaat ve Ticaret A.Ş.	İnşaat (Construction)	Approved	01.09.2023
Öncüoğlu Mimarlık Şehircilik ve Müş. Hiz. Ltd. Şti.	Mühendislik / Mimarlık (Engineering / Architecture)	Approved	10.05.2023
2. Çocuk Mahkemesi	Adalet ve Güvenlik (Justice and Security)	Approved	16.05.2022
21. Yüzyıl Türkiye Enstitüsü İktisadi İşletmesi	Toplumsal Hizmetler (STK) - Community Services	Approved	16.05.2022
24 Solutions Turkey Bilgi Teknolojileri ve Tic. A.Ş.	Bilişim Teknolojileri (Information Technologies)	Approved	06.07.2022
24 Solutions Turkey Bilgi Teknolojileri ve Tic. A.Ş.	Bilişim Teknolojileri (Information Technologies)	Approved	14.12.2022
20 Mayıs Okulları	Eğitim (Education)	Approved	11.11.2022
			📑 Add Company

To add a company, you can proceed to the next step by clicking on the <u>"Add Company"</u> button located at the bottom right on the page that opens. Search for your company's name in the search section. If your company is added, please do not log in again.

_	K	

8	<	俞	myTEDU Portal		Company 🗸
<					Add New Company
				*Company's Full Name:	Company's Full Name
				*Sector:	Please Select
Δ.					

After typing the full name and sector of the company you want to add, click on the

"Save and Send for Approval" button located at the bottom right.

(You will receive an information e-mail when the company you have added is approved by the career center. After receiving the confirmation e-mail, you can complete the internship registration.)

(These companies are not companies with which we have an agreement. They are only companies that have been logged into the system before.)





myTEDUPortal			Home \checkmark	
Student Employment	Internship Hom	e Courses Regis	stration Student Serv	rices Informa
Timesheet Entry Student Part Time E				
Internship				
Applications Internship Applications	Working Day Calculator Internship	Internship Companies Display and create n		
C+ O applications		≌і́ 3,31 к		
Home				
InfoBox	TEDUNews	Academic Calendar	About TEDU	Study Room Reservation
	۲	S		
Sports Eacility	Open Consent			

You can access the internship application page by clicking on the "<u>Applications</u>" box located on the <u>"Internship</u>" tab.





< 🗠 myTEDUPortal	Applications \checkmark
Applications	
Search	۹.
No data	

+ New Application

When you click on the <u>"New Application</u>" button in the lower left corner of the page, The page where you can add your information opens.





Please select your internship type from the options in the "General Infor

lication	
	`
Internship	
d Internship Program	
	…
	~
	🔓 Save as Draft 🛞 Cancel
าe_ <i>"T<u>ype o</u></i>	<u>f Internshi</u>
(* II	
rmation."	



First, choose the type of internship! If your internship is a Mandatory internship, please select your department from the <u>"Program of Study</u>" options and your internship course from the <u>"Internship Course</u> options.

There is a time conflict with academic calendar.



\checkmark

 \checkmark

1. General Information	on		
	Internship Number:		
	*Type of internship:	Mandatory	\sim
	*Program Of Study:	Please Select	\sim
	*Internship Course:	Please Select	\sim
	*Demand for SGK?:	Please Select	<u> </u>
		Please Select	
		I will ask TEDU to arrange it	
		The institution will arrange my insurance.	_
2. Date Information		I do not ask for an insurance because I am doing a REMOTE/ABROAD Interr	nship

Select your internship insurance claim from the <u>"SGK Request"</u> options. Choose who will do your insurance. If the company is not covering your internship insurance, you should select the "I will ask TEDU to arrange it." option. If you do remote internship you should select "I do not ask for an insurance because I'm doing a

<u>REMOTE/ABROAD internship.</u>" option.





You must log your internship, at least 3 (THREE) BUSINESS DAYS <u>BEFORE</u> your internship start date, otherwise the system will not accept it. You must specify start and finish dates. If you work on Saturday, you can select the relevant option. The internship start and end dates you entered in the relevant field must be the same as the dates you specified in your internship approval form.

lication		
		-
ternship.		
		
	~	
	~	
any? Then, click here to add.		
	\sim	

10		 3.Company Information *Company: 	Couldn't find your company? Then, click here to a	∽ dd.
		*Country:	Turkey	\sim
		*City:	Ankara	\sim
		*Company Department:	Company Department	
		*Contact Person's Name:	Contact Person's Name	
		*Contact Person's Position:	Contact Person's Position	
		*Contact Person's Email:	Contact Person's Email	
		Are you receiving payment?:	Please Select	\sim
		*Approved Application Document:	Choose a file (Only PDF files are allowed)	Upload
	∇			📑 Save as Draft 🛛 🛞 Ca

You must enter company information completely and accurately. After that fill out the mandatory/voluntary internship <u>approval form in the Approved Application Document section</u> <u>(it must have the company's seal and signature)</u> and upload it in PDF format and complete your internship application by clicking on the <u>"Save as Draft"</u> button located at the bottom right.



After your application is completed, you will receive approval from the Internship <u>Coordinator(only mandatory internship)</u>, <u>Career Center</u>, <u>Financial Affairs</u> respectively. You can follow the stage of your application from the field marked in red.

nship Application	
	~
d Electronics Enginering	\sim
mmer Practice I	~
e an insurance, I will ask TEDU to arrange it	
a time conflict with anadomic calendar	
CELENTING AND DEPENDENT OF ADDRESS IN A SECOND STREET, AND A SECOND S	
a since connect men academic caterioan.	
ting your internship.	

	New Internship Application
*Start Date: *End Date: *Will you work on Saturdays?:	
 3. Company Information 	
*Company:	
	Couldn't find your company? Then, click here to add.
*Country:	Turkey
*City:	Ankara N
*Company Department:	
*Contact Person's Name:	
*Contact Person's Position:	
*Contact Person's Email:	no information
Are you receiving payment?:	No
i Our students, who are Turkish Republic Citizer Bildirgesi section of the e-devlet, on the last b download the SGK Employment Statement of red, on the last business day before their inter	View Your Internship Form Download SGK Document ns, can download their SGK Employment Statement from the 4A İşe Giriş Çıkış usiness day before the start of their internship. Our international students can their internships in Turkey from the Download SGK Document section marked in nship starts.

12

T.C. Our students who are citizens can download the SGK Job Entry Declarations from the 4A İşe Giriş Çıkış Bildirgesi section in the e-government on the last working day before the start of their internship. <u>Our international students</u> can download the SGK Job Entry Declarations for their internships in Turkey from the "Download SGK Document" section marked in red on the last working day before the start of their internships.



If you are on a Study Scholarship (Part Time Working Student), you will see the internship entry screen like this and it will be automatically checked. You cannot make changes in this section.

ation		
	~	
e it	~	
	,	
		_
nship.		
	Ē	
	Ē	
	~	
		0
	[+ Save as Draft	⊗ Cancel



7.2.9

, and the second

LE



If you are a student at the Faculty of Architecture and you are going to do your internship by dividing it in half, "Are your internship dates partial?" check the box.

xct		~

uctio

W.

24

 \mathcal{M}

New Internship Application



You can fill out your internship approval form by downloading it from https://career.tedu.edu.tr/staj-formlari

MANDATORY INTERNSHIP APPROVAL				ORM
	Document No	Pub. Date	Rev. No / Rev. Date	Page No
TED UNIVERSITY	KYS-FR-84-ENG	16.12.2022	0 /-	1/1

To Whom It May Concern,

Our students are required to attend an internship program in an establishment until the end of their period of study as stipulated by our curricula.

Pursuant to the relevant provisions of the Vocational Education Law No. 3308, it has been decided that a part of the payments to be made to the students who attend vocational training, internship and complementary training in enterprises will be covered by the Unemployment Insurance Fund as a state contribution. Accordingly, the payment to be made as state contribution will be calculated over thirty percent of the net amount of the minimum wage; it cannot be less than two-thirds if the enterprise where vocational training is received employs less than twenty employees, and not less than one-third if it employs twenty or more employees. Wages to be paid to students are exempt from all kinds of taxes.

In order for this insurance to be issued by our University, the relevant section below must be approved by you. We would like to thank you for your interest in our student's internship in your organization and wish you success in your work. Please deliver this form to the student.

Insurance of the trainees against work accidents and occupational diseases are to be covered by our university during the internship. In order that we can complete the related social security procedures, you are kindly requested to approve the relevant section of the form below. We would like to thank you for the opportunity you have provided our below-mentioned student with and wish you success in your work. Please submit this form back to the trainee.

STUDENT INFORM	ATION			
STUDENT INFORM	ATION		L	- 1
Name-Surname			Rep. of Turkey ID 1	No.
Faculty			Dept./Program	
Phone No (GSM)			e-Mail	
Internship Code	Summer Practic	eI 🛛 Summ	er Practice II 🛛 🛛] Ço-op
RELEVANT INFOR	MATION OF T	HE INSTITUTI	ON OF INTERN	SHIP
Starting Date of the Internship		Ending Date of the Internship		Duration (Workdays) ¹
Name of the Company			Related unit	
Company Address				
Phone No.				
e-Mail				
EMPLOYER/AUTH	ORIZED PERSO	ONNEL INFOR	MATION	
Name Surname				
Position/Title			Internship of	
e-Mail			the Trainee has	
Trainee will be paid	🛛 Yes	🗆 No	been accepted.	Date/Name-Surname/Stamp/Signatur
		CAREER CE	NTER	



To Whom It May Concern.

Voluntary internships, which are common at TED University, are supported until graduation without time limitations; internship insurances, in these cases, are covered by the university.

Pursuant to the relevant provisions of the Vocational Education Law No. 3308, it has been decided that a part of the payments to be made to the students who attend vocational training, internship and complementary training in enterprises will be covered by the Unsmployment Insurance Fund as a state contribution. Accordingly, the payment to be made as state contribution will be calculated over thirty percent of the net amount of the minimum wage; it cannot be less than two-thirds if the enterprise where vocational training is received employs less than twenty employees, and not less than one-third if it employs twenty or more employees. Wages to be paid to students are exempt from all kinds of taxes. In order for this insurance to be issued by our University, the relevant section below must be approved by you. We would like to thank you for your interest in our student's internship in your organization and wish you success in your work. Please deliver this form to the student.

Insurance of the trainees against work accidents and occupational diseases are to be covered by our university during the internship. In order that we can complete the related social security procedures, you are kindly requested to approve the relevant section of the form below. We would like to thank you for the opportunity you have provided our below-mentioned student with and wish you success in your work. Please submit this form back to the trainee.

STUDENT INFORM	ATION			
Name-Surname			Rep. of Turkey ID N	0.
Faculty			Dept./Program	
Phone No (GSM)			e-Mail	
Internship Type	□Short Term	🛛 Long Term ((Min. 90 days)	
INFORMATION ON	THE INTERNS	HIP VENUE		
Starting Date of the Internship			Ending Date of the Internship	
Name of the Company			Related unit	
Company Address				
Phone No.				
e-Mail				
EMPLOYER/AUTHO	RIZED PERSO	NNEL INFOR	MATION	
Name Surname				
Position/Title			Trainee has been	
e-Mail		· · · · · · · · · · · · · · · · · · ·	admitted for	
Trainee will be paid	🛛 Yes	🗆 No	internship.	Date/Name-Sumame/Stamp/Signature
		THE CAREER	CENTER	

¹ Minimum period of the mandatory internship is 20 consecutive days for the Faculty of Economics & Administrative Sciences and the Faculty of Engineering; 30 days for the Faculty of Architecture and 60 consecutive days for the Co-op.

UNCLASSIFIED

* Unclassified documents are to be classified as "Confidential" when filled in.

Date/Name-Sumame/Signature

ARY	INTERNSHIP	APPLICATION FORM	
			2

Pub. Date	Rev. No / Rev. Date	Page No
18.11.2022	0 / -	1/1

	Rep. of Turkey ID No	h.
	Dept./Program	
	e-Mail	
] Long Term (Min. 90 days)	
P VENUE		
	Ending Date of the Internship	
	Related unit	
NEL INFOR	MATION	

Date/Name-Sumame/Signature

NCLASSIFIED
ntial" when filled in

