

CERTIFICATE OF EMPLOYMENT
(concerning the consideration of receiving
credit for internship)

I. STUDENT INFORMATION

1. Name and surname: Student ID number:.....
 2. Year: mode: full-time part-time*
 3. Academic year:
 4. Field of study:
 5. Specialisation:

II. NAME AND ADDRESS OF THE INSTITUTION/COMPANY WHERE THE STUDENT WORKS

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III. EMPLOYMENT DETAILS

1. Type of contract/agreement:
 2. Duration of employment:
 3. Position:
 4. Scope of responsibilities:

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Opinion:

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Evaluation of the work carried out was on a level*:

very good	good	satisfactory	unsatisfactory
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.....
 City and date

.....
 Institution/Company stamp

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 Stamp and signature of the Manager/Director of the
 Institution/Company

*Tick as appropriate