



TRAINEESHIP CERTIFICATE

Name of the trainee:
Name of the receiving organisation/enterprise:
Address of the receiving organisation/enterprise [street, city, country, phone, e-mail address], website:
Start and end of the traineeship: from [day/month/year] till [day/month/year]
Traineeship title:
Detailed programme of the traineeship period including tasks carried out by the trainee:
Knowledge, skills (intellectual and practical) and competences acquired (learning outcomes achieved):
Evaluation of the trainee:

Date:

Name and signature of the responsible person at the receiving organisation/enterprise: