

Academic Year 2021/2022

AFTER THE MOBILITY

Table D - Traineeship Certificate by the Receiving Organisation / Enterprise

Name of the trainee:	
Name of the Receiving Organisation:	
Address of the Receiving Organisation:	
Sector of the Receiving Organisation:	
Traineeship title:	
Start date and end date of the complete traineeship: from to (incl. virtual component, if applicable; please enter the first and last working day) to	
Start date and end date of the physical traineeship: from to	
Detailed program of the traineeship period, including tasks carried out by the trainee:	
Knowledge, skills (intellectual and practical) and competences acquired (learning outcomes achieved):	
Evolution of the trained by the Desciption Opportunitien.	
Evaluation of the trainee by the Receiving Organisation:	

Responsible Person at the Receiving Organisation/enterprise:

Name:

Responsible person's signature and **stamp**: