

Traineeship Certificate – after mobility

<p>Name of student, UČO:</p> <p>Home institution, country: Masaryk University, Czech Republic</p> <p>Supervisor at Home institution (name, contact):</p>
<p>Host institution:</p> <p>Faculty/department of the Host institution:</p> <p>Address of the Host institution (street, city, country, phone, email address, websites):</p>
<p>Start date and end date of traineeship: from (day/month/year) to (day/month/year)</p> <p>Traineeship activities were carried out:</p> <p>face-to-face from (day/month/year) to (day/month/year)</p> <p>on-line from (day/month/year) to (day/month/year)</p>
<p>Detailed programme of the traineeship period including tasks carried out by the student:</p>
<p>Knowledge, skills (intellectual and practical) and competences acquired (achieved Learning Outcomes):</p>
<p>Evaluation of the student:</p>
<p>Date:</p>
<p>Student's signature:</p>
<p>Name and signature of the supervisor at the Host institution:</p>

Confirmation on Placement Period from Masaryk University

We confirm that the proposed programme based on Learning Agreement for Traineeships was fulfilled and completed.

I approve its recognition as following MU course(s) upon satisfactory traineeship completion (enter course code, course title, number of credits):

Date:

Name and signature of responsible person at MU (= supervisor):