

PROTOCOL ON ACCEPTING A STUDENT FOR A TRAINEESHIP

ORGANISATION

NAME:
COMPANY ID. NO.:
REG. ADDRESS:
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(hereunder only the „Organisation“)

ACCEPTS BELOW-NAMED TRAINEE:

FIRST NAME, SURNAME, UČO:

CONTACT CELL PHONE NUMBER:

PROGRAMME/SPECIALISATION:

TRAINEESHIP WILL RUN BETWEEN: AND:
(fill in dates). IN THE SCOPE OF 600 HOURS AT LEAST.

TRAINEESHIP LOCATION:

WORKING HOURS:

GENERAL ASSIGNMENT:

ORGANISATION GUARANTOR:

CONTACT NUMBER OR EMAIL OF THE GUARANTOR:

GRADUATED FROM (NAME OF UNIVERSITY):

YEAR OF UNIVERSITY GRADUATION AND SPECIALISATION:

STUDENT AGREES to make effort to meet the objectives of specialist traineeship. He must respect the instructions of the Organisation Guarantor and managers of the Organisation. The student will refrain from any activities that might damage the Organisation's or Faculty's good name. In case the student comes into contact with any confidential information, s/he must maintain confidentiality. Failure to comply with this condition will be deemed serious infringement of his/her study responsibilities and will be resolved in accordance with the pertinent regulations.

THE ORGANISATION AGREES to bear responsibility of the readiness to accept the student for a traineeship in the given period, assigning a guarantor and possibly also other mentors, for assigning student to organisation's projects, determining the limits between business secret and disclosable generalisation for academic purposes of the traineeship and overall liaison towards attaining the traineeship objectives. If needed the Organisation will allow Faculty representative to check up on the student in the place of the traineeship.

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SIGNED ON BEHALF OF THE ORGANISATION

STUDENT'S SIGNATURE