

DECLARATION OF SKILLS

SECTION A – TRAINEE'S PER	RSONAL DATA
Surname	Name
Address (Street Name and Street Number, Postcode, City, Country)	
Date and Place of Birth	
SECTION B – CONTACT D	DETAILS
B.1 – Sending Instituti	ion
Name of Sending Institution	Stamp and Signature
Name of Sending Tutor	Role / Function within the structure
Telephone	E-mail
B.2 – Host Organization	
Name of Host Organization	Stamp and Signature



B.3 – Training Contents Educational Objectives Internship Duration Number of months From dd mm year to dd mm year Hosting structure SECTION C - DESCRIPTION OF SKILLS GAINED AT THE END OF THE PLACEMENT Codification, name and job description (Please describe the professional profile, by specifying the maactivities, responsibilities and the type of working environment.) Activities and tasks performed. (Please describe in detail the activities and tasks carried out by the trainee)	B.3 – Training Contents Educational Objectives Internship Duration From dd mm year to dd mm year Hosting structure SECTION C - DESCRIPTION OF SKILLS GAINED AT THE END OF THE PLACEMENT Codification, name and job description (Please describe the professional profile, by specifying the maactivities, responsibilities and the type of working environment.) Activities and tasks performed. (Please describe in detail the activities and tasks carried out by the specific content of the professional profile in the professional pr	Name of On-si	te Tutor			Role / Function withi	n the structure
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anguage skills and cor	npetences. (Please describe any language	e skills developed by the trainee)
lotes and comments. (nternship experience.)	Please add in any other relevant informat	ion to describe the results achieved durin
Date dd/mm/year	Stamp and Signature On-site Tutor	Trainee's Signature