

 **UNIVERSITY OF CATANIA**

**TRAINING AGREEMENT**

Trainee’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_born in \_\_\_\_\_\_\_\_\_\_\_\_\_\_ date \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_\_/

Resident in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Via **\_\_\_\_\_\_\_\_\_\_\_**No. **\_\_\_\_\_\_\_\_\_\_**

Tel. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

e-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fiscal Code No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Situation**:

□ (For Graduates)Degree in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

Date of graduation \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_\_/

□ (For Student) Department\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Hosting Structure \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sector \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Internship Location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Hours of access to the premises of the host organization:**

Number of months **\_\_\_\_** from **\_\_\_\_\_\_\_\_\_**/ to\_\_\_\_\_\_\_\_\_\_\_\_

Number of days \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of weekly hours \_\_\_\_\_\_\_\_\_

Internship Timetable: from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Teaching Tutor: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

## Company Tutor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Qualification\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Insurance Policy**:

* INAIL, the public body responsible for Work Accidents Compensation: Coverage injury ensured by the so-called form of "management on behalf of the State."
* Civil Liability Insurance (C.V.T) Policy n. 600000146-Company QBE Insurance (31.01.2017- 31.01.2020)
* Accidents Policy n. 151056636 -Company UnipolSai – (31.03.2017- 31.03.2019)

OBJECTIVES AND METHODS OF TRAINING

1. **Skills to be developed:**

Technical and Professional Skills: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Versatile Skills:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Basic Skills:

1. **Activity**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Ongoing and final methods of evaluation**

* attendance sheet;
* final assessment on work performance;
* customer satisfaction questionnaire;

c) **Allowance**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The listed documents must be duly signed by all parties and handed in at the end of the internship.**

**Modes of internal and external tutorship: daily supervision of company mentor and some periodic meetings with the appointed teaching assistant in order to assess the work performance.**

**Facilities provided:**

🞎 Reimbursement 🞎 Incentives 🞎 Other 🞎 None

**Trainee’s Duties :**

- to carry out all the activities encompassed by the training project ;

- to follow the instructions given by tutors and report to them for any organizational requirements or any other occurrence;

- to comply with the obligations regarding the confidential nature of company productive processes or any other related information that the trainee may come across during and/or after the training period;

- to comply with corporate regulations of hygiene, health and safety standards of the workplace.

The undersigned / trainee authorizes the processing of personal data under the Legislative Decree 196/2003 along with all the subsequent amendments and hereby certifies the authenticity of the above information, according to the provisions of art. 46 of the Presidential Decree, dating December 28th, 2000 No. 445, being aware of the loss of all benefits according to art. 75 of the Presidential Decree 445/2000 along with all the criminal consequences envisaged by art. 76 of the same Presidential Decree in the event of any possible falsification of documents and statements.

Accademic Tutor’s signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrative Tutor’s signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trainee’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature and stamp of the Host Organization

Stamp of the Home University