

Student Mobility for Traineeships
Traineeship Certificate by Receiving
Organisation/Enterprise

Name of the Trainee

Name of the
Receiving Organisation

Sector of the
Receiving Organisation

Address of the
Receiving Organisation
(street, city, country, phone, email address,
website):

Dates of the
traineeship:

from (dd/mm/yy)

till (dd/mm/yy)

Traineeship title

Detailed programme of the traineeship
period including tasks carried out by the
trainee:

Knowledge, skills and competences
acquired (achieved Learning Outcomes):

Evaluation of the trainee:

Date

Name of the Supervisor

Signature of the Supervisor at the
Receiving Organisation:

Stamp of Receiving Organisation