ERASMUS TRAINEESHIP A.A. _____

Academic Student's Traineeship in Europe

AND TRANSCRIPT OF WORK

SENDING UNIVERSITY	: UNIVERSITA' DEGLI STUDI DEL SANNIO – I BENEVEN02
HOSTING INSTITUTION / ENTERPRISE	:

I, the undersigned, as legal representative of [name, place and full address of institution/enterprise]

_____

HEREBY CERTIFY

- that the trainee _____ _____
  [name] *[surname]*

born in _____ State _____ on _____

has completed an Erasmus Traineeship under the , in the field of

_____ with our Institution/Enterprise;

- that the duration of the traineeship was of _____ months, starting on _____ and ending on _____;

- that completed his/her training period with the following result (overall evaluation of the trainee's performance):

☐ very good; ☐ good; ☐ satisfactory; ☐ not sufficient

Please provide an explanation for the feedback on the trainee's work provided above:

Date .....

SIGNATURE and STAMP
HOST INSTITUTION: