# **TRAINEESHIP REPORT**

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| **Name of the trainee:** |  |
| **Name of the Company/Institution:** |  |
| **Address:** |  |
| **VAT Registration Number:** |  |
| **Name, surname and function of the legal representative of the company:** |  |
| **Name of the person in charge of the trainee (Mentor):** |  |
| **Contact person:** | **Name and surname:** |  |
| **Phone number:** |  |
| **e-mail address:** |  |
| **Traineeship title:** |  |
| **Programme of the traineeship** *(including tasks carried out by the trainee):* |  |
| **Total number of working hours:** |  |
| **Start and end date of the traineeship:** |  |
| **Evaluation of the trainee***(Observation and evaluation of the trainee´s skills gained during the traineeship, communicativeness, workplace discipline, realization of the project task)* |  |
| **Overall rating of the trainee - recommended grade\*:****(provided by mentor)** |  |
| **Company certification:** | **Name and surname:** | **Stamp:** |
| **Signature:** |