

TRAINEE						
Last name	First name	Date of birth	Nationality	Sex	Study cycle	Field of education

<b>Traineeship title</b>	<b>Number of working hours per week</b>
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**Receiving organisation/Enterprise (where/web site/working field)**

**Detailed programme of the traineeship**

**Knowledge skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes)**

Date: \_\_\_\_\_

Signature: \_\_\_\_\_