

TRAINEESHIP CERTIFICATE

Host Company:	
The undersigned:	employed with
Current job title:	
	Hereby declares that
Mr./Ms.	
Student Identification Number	
Employed with The Above-Mentione	ed Company: Yes □ No □
has concluded the term required for t	he traineeship for a total amount of
hours, from/ to	/, , in compliance with all
related purposes and legal provisions	
Company Tutor	Legal Representative
(Stamp and Signature)	(Stamp and Signature)
Date	
Place	