**OB-7-22-6**

**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, communication skills, workplace discipline, realization of the project task)* |  |
| Overall rating of the trainee - recommended grade\*:(provided by the mentor) |  |
| Company certification: | Name and surname: | Stamp: |
| Signature: |

*\*Grading system: excellent-5; very good-4; good-3; sufficient-2; insufficient-1*