

**PERSONAL DATA**

Name	Student number
Street address (home)	Postal code and city
E-mail address	Telephone number

**STUDY PLAN**

Degree programme:
Major:

**PRACTICAL TRAINING (to be filled by the employer)**

Company:
Duration of training in full weeks (37,5-40 h / week):
Work environmental training: _____ / _____ 20_____ - _____ / _____ 20_____
Professional training: _____ / _____ 20_____ - _____ / _____ 20_____

**The work environmental training** aims to familiarize the student with the physical and social environment in his/her prospective profession, its traditions and language, its problems and their solutions.

**The professional training** aims to teach the student to apply his basic theoretical knowledge to the solving of practical problems.

Description of work:
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\_\_\_\_\_ / \_\_\_\_\_ 20\_\_\_\_\_

Place \_\_\_\_\_ Time \_\_\_\_\_ Supervisor of Practical Training \_\_\_\_\_

\_\_\_\_\_

Position

\_\_\_\_\_

Contact information (email, phone)

(Stamp)