

After the Mobility

<i>Table D - Traineeship Certificate by the Receiving Organisation/Enterprise</i>		
Name of the trainee:		
Name of the Receiving Organisation/Enterprise:		
Sector of the Receiving Organisation/Enterprise:		
Address of the Receiving Organisation/Enterprise [street, city, country, phone, e-mail address], website:		
Start date and end date of traineeship (incl. virtual component, if applicable): from	[day/month/year] to	[day/month/year]
Start date and end date of physical component : from	[day/month/year] to	[day/month/year]
Traineeship title:		
Detailed programme of the traineeship period including tasks carried out by the trainee (including the virtual component, if applicable):		
Knowledge, skills (intellectual and practical) and competences acquired (achieved learning outcomes):		
Evaluation of the trainee:		
Date:		
Name and signature of the Supervisor at the Receiving Organisation/Enterprise:		