***Załącznik nr 1***

*do Zarządzenia Rektora*

*nr R-0201-51/2020 z dnia 12 sierpnia 2020 roku*

 *(Place, date)*

*……………………………..*

*(Company name and address)*

**Internship confirmation statement**

I hereby confirm thatMr/Ms …………………………………………….. *(student’s/graduate’s name)*, student register number ……………., will do their internship at …………………… *(Company name and address)* from ………… *(date)* to ………… *(date),* under the supervision of …………………. (*name of the internship supervisor),* pursuant to the Erasmus + programme agreement*.*

The internship will take one the following forms:

1. At the Company offices only,
2. At the Company offices: ……… *(number of working days)* and on-line……….*(number of working days),*
3. On-line only.

*\*Please select one of the options above*

……………………

*(employer’s signature)*