

***Appendix No. 2***

*to the Rector's Ordinance No* . R.0211.4.2025 from 27 January 2025

# REPORT

**ON THE CONDUCT OF THE STUDENT INTERNSHIP**

(hereinafter: "internship")

Student Name: …………………

Student ID number …………………

degree: ………………………………………………………

specialty: ………………………………………………………

year of study: …

Duration of the internship from ..................... to......................

Internship Organizer:

………………………………………………………………………………………………………………

Internship agreement PSWN/year/month/number



**CONDUCT OF THE INTERNSHIP**

*(completed learning outcomes, tasks, activities)*

|  |  |  |  |
| --- | --- | --- | --- |
| Nr. | Category | Learning Outcomes | Tasks, activities performedduring the internship |
| 1 | Knowledge |  |  |
| 2 | Skills |  |  |
| 3 | Social Competences |  |  |



# I confirm the course of the internship described above and the achievement of learning outcomes by the student during the internship (*please tick the appropriate answer*):

|  |  |  |
| --- | --- | --- |
| **Nr.** | **Category** | **Confirmation** |
| **1** | Knowledge outcome(s) | has/have been fully completed by the student |  |
| has/have been completed by the student |  |
| has/have not been completed by the student |  |
| **2** | Skill Outcome(s) | has/have been fully completed by the student |  |
| has/have been completed by the student |  |
| has/have not been completed by the student |  |
| **3** | Social competences outcome(s) | has/have been fully completed by the student |  |
| has/have been completed by the student |  |
| has/have not been completed by the student |  |