



INTERNSHIP

agreement no. _____ undersigned on _____

STUDENT DETAILS

Name of student _____ Tel _____

E-mail _____ Tax ID _____

Born in _____ on _____

Resident in _____ via _____

Domiciled at _____ via _____

Faculty:

- Student

Degree programme

Internship for dissertation
other internship activities

no. of credits
no. of credits

- Graduated _____ on _____ from the University of
BOLOGNA

Faculty:

Degree
Programme

yes no

Disabled student

Host Structure

Place/s of internship (factory, departments, offices)

Access times to the company premises

Period of internship _____ from _____ to _____

Name of academic tutor (*1)

Name of company tutor (s)

INSURANCE POLICIES

- Accident insurance - INAIL "Gestione per Conto"
- Civil liability policy no. 65/745444524 issued by UNIPOLSAI
- Injury policy n° IAH 0008528 issued by AIG

- LEARNING OUTCOMES OF THE INTERNSHIP (*2)

- INTERNSHIP ACTIVITIES AND METHOD OF PERFORMANCE

Subsidies:

None

Reimbursement of expenses Euros

Board – luncheon vouchers

Study grant Euros

Lodging

Other

Obligations of the student:

- to comply with the instructions issued by the tutors and refer to them for all organisational and other requirements;
- to comply with the obligations of confidentiality over production processes, products or other company information of which they may become aware, both during and after the internship;
- to comply with the company regulations and the health and safety standards

Bologna

The date will be indicated by the

University office

Signatures

- Signature for acknowledgement and acceptance by the student

- Signature of the tutor responsible for teaching/organisational matters
(tutor appointed by the promoter) *1

- Signature for the Alma Mater Studiorum-University of Bologna
(Dean of the School or Chairman of the Board
of internship or degree programme, as and where appointed)

- Signature of the Company/Body (*3)

E-mail

*1 Lecturer with a permanent contract or Confirmed Assistant Professor of the University of Bologna (tutor responsible for organisational and teaching matters)

*2 Indicate the learning outcomes and knowledge of the job market. For Dissertations and other activities, indicate the outcomes, methods and learning activities

*3 Name of the company, e-mail to which the internship programme is to be sent in true copy, Company Stamp, name of the legal representative or deputy and relative signature.