



ALMA MATER STUDIORUM - UNIVERSITA' DI BOLOGNA

ERASMUS PLACEMENT TRANSCRIPT OF DATES (START&END) A.Y. 2012/13

SENDING UNIVERSITY : UNIVERSITA' DI BOLOGNA - I BOLOGNA 01
NAME OF HOSTING INSTITUTION OR COMPANY : GENT UNIVERSITY (LAB.MET)

Questo modulo, compilato nella prima parte (Part 1) deve essere caricato in AlmaRM entro una settimana dall'inizio del tirocinio. Lo stesso modulo, compilato in tutte le sue parti, ci dovrà essere consegnato **IN ORIGINALE** entro 30 giorni dalla fine del tirocinio (entro il 7 ottobre 2013 solo per chi finisce il tirocinio a fine settembre 2013), pena la restituzione del finanziamento ricevuto.

STATEMENT - ATTESTAZIONE

PART 1: START DATE OF THE TRAINING

To be filled in and signed by the hosting institution/company and stamped with the official seal.

Da far compilare e firmare da un legale rappresentante dell'ente ospitante (e validare con il timbro ufficiale dell'ente)

I, the undersigned, as legal representative of GENT UNIVERSITY (LAB.MET) [name of the institution/company]

hereby declare that the trainee [name] GIOVANNI [surname] ROSSI

started his/her training period at our institution/company on 01/04/2013 [dd / mm / yyyy]

Name: [name] ~~BOON~~ NICO [surname] BOON

Date: 08/04/2013 [dd/mm/yyyy] Signature:

Vakgroep Biochemische en
Microbiële Technologie
Seal of the institution/company*
Timbro dell'istituzione/impresa
Dr. ir. N. Boon
Coupure Links 653
B-9000 GENT

* If you haven't got a company stamp, please declare it on your headed paper and attach your statement to this form

PART 2: END DATE OF THE TRAINING

To be filled in and signed by the hosting institution/company and stamped with the official seal of the institution/company at the end of the Erasmus Placement.

Da far compilare e firmare da un legale rappresentante dell'ente ospitante (e validare con il timbro ufficiale dell'ente) alla fine del tirocinio.

I, the undersigned, as legal representative of GENT UNIVERSITY (LAB.MET) [name of institution/company]

hereby declare that the trainee [name] GIOVANNI [surname] ROSSI

completed his/her training period at our institution/company on 01/07/2013 [dd / mm / yyyy]
according to the activities described in the training agreement.

Name: [name] BOON [surname] NICO

Date: 01/07/2013 [dd / mm / yyyy]

Signature:

Head of Department
Seal of the institution/company
Timbro dell'istituzione/impresa

Please sign and date this statement on the very last day of the internship (not before).

Attenzione: questa parte deve essere firmata e datata l'ultimo giorno del tirocinio.
Vakgroep Biochemische en
Microbiële Technologie

LabMET
Prof. Dr. ir. N. Boon
Coupure L 653
B-9000 GENT



ALMA MATER STUDIORUM UNIVERSITA' DI BOLOGNA

ERASMUS PLACEMENT TRANSCRIPT OF WORK A.Y. 2012/13

SENDING UNIVERSITY : UNIVERSITA' DI BOLOGNA - I BOLOGNA 01
NAME OF HOSTING INSTITUTE OR COMPANY : University of Ghent

Questo modulo, compilato in tutte le sue parti, ci dovrà essere consegnato **IN ORIGINALE** entro 30 giorni dalla fine del tirocinio, e comunque **non oltre il 7 ottobre 2013** solo per chi finisce il tirocinio a fine settembre, pena la restituzione del finanziamento ricevuto.

STATEMENT - ATTESTAZIONE

PART 3: EVALUATION OF THE TRAINEE'S PERFORMANCE

To be filled in and signed by the hosting institution/company and stamped with the official seal of the institution/company at the end of the Erasmus Placement.

Da far compilare e firmare da un legale rappresentante dell'ente ospitante il tirocinio (e validare con il timbro ufficiale dell'ente) alla fine del tirocinio.

I, the undersigned, as legal representative of University of Ghent [name of institution/company] hereby declare that the trainee [name] Giovanni [surname] Rossi

completed his/her training period according to the activities described in the training agreement with the following result (overall evaluation of the trainee's performance):

☐ very good; ☐ good; ☒ satisfactory; ☐ not sufficient

Total working hours (for the 3-month-internship, not per month): 480.h

Please provide an explanation for your evaluation of the trainee's performance:

Giovanni Rossi developed the objectives described in this project,
he obtained finally a score of 12 over 20,
Thus, he passed the final exam of his master studies in Ghent University.

Name: [name] Ramiro [surname] Vilchez Vargas

Date: 25/06/2013 [dd/mm/yyyy]

Signature:

[Signature]

postdoctoral researcher

Seal of the institution/company:
Timbro dell'Istituzione/Impresa

Prof. Dr. ir. N. Boon
Head of Department

Vakgroep Biochemische en
Microbiële Technologie

LabMET
Prof. Dr. ir. N. Boon
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