

## STUDENT INFORMATION

*The report must be completed on a computer. Recommended program: Adobe Acrobat Reader.*

Name		Major	
Surname		Student number	

full-time studies

part-time studies

## INTERNSHIP TYPE

*Please mark the performed type of internship by choosing the appropriate button:*

**1.** student internship

**2.** employment or B2B work

**3.** other: .....

*After selecting the type of internship, please provide the following documents, based on the button number:*

Required documents based on the type of internship	1.	2.	3.
A copy of an employment certificate or of a contract		●	

*Regardless of the internship type, student's work should be treated as a regular internship and this document should be completed accordingly.*

## INTERNSHIP INFORMATION

Internship start date		No. of weeks		Days per week	
Internship end date		<i>Please fill in an average value</i>		Hours daily	

Internship provider (company etc.)	
Internship provider's address	
Internship supervisor at the company	
Internship subject	
Intern's scope of duties	
Projects completed during the internship; other accomplishments	

**I confirm that all the supplied information is correct.**

.....  
Student's signature

.....  
Internship provider's signature and stamp

.....  
date

.....  
position

*In the absence of the internship provider's stamp, a document confirming the business activity of the company where the internship took place is required.*

**COMMENTS**

Your comments help us improve the educational program at the Polish-Japanese Academy of Information Technology. We would appreciate any suggestions.

Student's remarks <i>Including a mention about the organization of the internship</i>	
Internship provider's remarks <i>In particular about the student's expertise</i>	
Internship provider's suggestions <i>In particular about the PJAiT curriculum</i>	

.....  
*Student's signature*

.....  
*Internship provider's signature*

**INTERNSHIP SETTLEMENT**

*Filled by the Rector Plenipotentiary for Student Internships*

Total number of internship hours .....

.....  
*date*

.....  
*Rector Plenipotentiary for Student Internships' signature and stamp*