Poznań, date: ……………………..

……………………………………….

(Student’s name)

……………………………………….

(student’s book no.)

……………………………………….

(study programme)

……………………………………….

(semester)

**To:**

**(academic title and name of Vice-Dean)**

Vice-Dean for Education

**(academic title and name of Internship Supervisor)**

Internship Supervisor

**Application for internship date change**

|  |  |
| --- | --- |
|  | Application for permission to carry out the internship during the teaching period of the semester when the internship is due. |
|  | Application for permission to carry out the internship during a different semester than the one when the internship is due according to the study plan. |

**Substantiation:**

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**Internship schedule[[1]](#footnote-1):**

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**I hereby confirm that I have active accident insurance (NNW) and third party insurance (OC) for the period of carrying out the internship.**

*………………………………………..…*

 *Date and Student’s signature*

..................................................................................................................................

*Decision of the Vice-Dean or Internship Supervisor*

 *……………………………………………….*

*Signature of the Vice-Dean for Education or Internship Supervisor*

1. The schedule is necessary in the event of carrying out the internship during the teaching period. The internship must not interfere with the planned classes. [↑](#footnote-ref-1)