……………………………………….. **Attachment no. 3**

 Enterprise stamp

**CERTIFICATE OF INTERNSHIP COMPLETION**

It is certified that the Student:

name and surname of Student ……………………………………………………………….……………..

student ID no.…………………………………….. field od study: ……………………………………………

semester / year of study: …………………………….. group: ………………………..………………..

has completed student internship in:

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

name and address of Enterprise

dated from Click to enter date. to Click to enter date

in the amount of………hours

**OPINION OF THE INTERNSHIP SUPERVISOR IN THE ENTERPRISE:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Assessment of skills and competences** | **definitely****YES** | **to a degree** | **definitely****NO\*** |
| 1. | Is able to put into practice the principles of health and safety at work related to the profession of telecommunications engineer and has the necessary preparation to work in business organizations |  |  |  |
| 2. | The student is able to practically apply the knowledge gained during the academic curriculum. |  |  |  |
| 3. | Demonstrates responsibility and professionalism in solving technical problems. Is able to participate in collaborative projects. |  |  |  |
| 4. | Correctly interprets and resolves dilemmas related to working in the field of electronics and telecommunications. Is able to think and act in a businesslike way. |  |  |  |

\*At least two NO marks result in failing the internship

Other remarks of the Internship Supervisor in the Enterprise:

……………………......................................................................…………………….………………………

……………………......................................................................…………………….………………………

……………………......................................................................…………………….………………………

..………………………..

 Signature of Internship Supervisor in the Enterprise

 ……………………………………………………

Legible signature and stamp of the Enterprise Representative