**Section to be completed AFTER THE MOBILITY**

**TABLE D- Traineeship Certificate by the Receiving Organisation/Enterprise**

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| --- |
| **Name of the trainee:** |

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| --- |
| **Name of the receiving organisation/enterprise:** |

|  |
| --- |
| **Sector of the receiving organisation/enterprise:** |

|  |
| --- |
| **Address of the receiving organisation/enterprise** *[street, city, country, phone, e-mail address]***, website:** |

|  |
| --- |
| **Start date and end date of the complete traineeship (incl. virtual component, if applicable**): from [day/month/year] …………………. to [day/month/year] ……………….  **Start date and end date of physical mobility:** from [day/month/year] …………………. to [day/month/year] ………………. |

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| --- |
| **Traineeship title:** |

|  |
| --- |
| **Detailed programme of the traineeship period including tasks carried out by the trainee:** |

|  |
| --- |
| **Knowledge, skills (intellectual and practical) and competences acquired (learning outcomes achieved):** |

|  |
| --- |
| **Evaluation of the trainee:** |

**Date:**

**Name and signature of the Supervisor at the receiving organisation/enterprise:**

**(\*)**

* Dates blurred, amended with correction fluid or overwritten will not be accepted
* The date of signature cannot be earlier than the ending date.
* This document must be submitted by the student via [Seu Electrònica UV](https://www.uv.es/seu-electronica/ca/electronica-uv.html)(Through "my paperwork" in the procedure for the Erasmus Placement).