



COMPANY AGREEMENT FORM

TRAINEESHIP OFFER for:

Name and Surname of the Trainee:

Traineeship period: months starting from:

(any date within 01/06/2019 – 30/09/2020)

Working hours per week (18 – 40 hours per week):

Traineeship title:

Detailed programme of the training period:

Knowledge, skills and competences to be acquired by the trainee at the end of the traineeship:

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.....

Monitoring plan:

Evaluation plan:

Main language of the traineeship:

- The candidate has an adequate knowledge of language to carry out the training placement at our company.

Name of Contact person:

Contact person's email: Contact person's phone number:

We hereby confirm that we are willing to host Mr/Ms student of the University of Valladolid, as a trainee in our company, if he/she obtains an Erasmus+ status under the University of Valladolid's Erasmus+ Mobility for traineeship scheme.

We intend to entrust him/her with tasks and responsibilities according to his/her studies, qualifications and knowledge and as specified in the traineeship offer above.

Date: Name of signee (supervisor):

Position of signee:

Signature:

Company stamp: