

Training place

## Educational training project

(Educational project no	with reference to Agreement no	signed on)	
Name of Trainee	matriculation no		
Born inc	ntax no		
Place of residence			
Telephone noE-mail ad	ddress		
Education			
Student 🔲 Graduated 🥅			
in	Curriculum		
· · · ·	0 a a.a		
Awarded on			
Lloot outbority (company dataile			
Host authority/company details			
Name			
Registered Office			
<u> </u>			
Code no.			
VAT no.			

Production Sector _	 	 	
Training period			

i raining period						
from	tono. of months	no.	of	training	hours	per day
In the event of an extension/early conclusion/interruption of the training period the host company/authority representative must send notification by e-mail to placement@unibg.it at least 6 days before the expiry date.						
Insurance policy: INAIL (National Insurance Institute for Industrial Accidents) Insurance no. COD. N. 3104						

(policy aginst accidents) Position no 0363400988Compagnia HDI Assicurazioni Spa – Agenzia Generale di Perugia 363 Civil liability: Position no 10363400991. stipulated with Compagnia HDI Assicurazioni Spa – Agenzia Generale di Perugia 363

24122 Bergamo, via S. Bernardino 72/e tel. 035 2052 272 / 273 (orientamento) 275 (tirocini) 289 / 291 / 292 (placement) fax 035 2052 298 email: orientamento@unibg.it – tirocini@unibg.it – placement@unibg.it Università degli Studi di Bergamo www.unibg.it Cod. Fiscale 80004350163 P.IVA 01612800167



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## Training proiect

Description of the training activities agreed between the host company representative and the trainee. (Specify if the activities are to be carried out in more than one place and/or there will be some travel or activities outside the base).

1. Benefit provided

REFUND OF EXPENSES:	NO	YES	AMOUNT OF MONEY	
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ACCESS TO THE CANTEEN

LUNCHEON VOUCHERS

No. hours per week: \_\_\_\_\_

## 3. Trainee's duties

a) Follow the tutor's recommendations

b) Respect confidentiality obligations concerning production processes, goods, or any other information about the company that the trainee will gain knowledge of during or after the training period.

c) Respect the company's rules and regulations concerning hygiene and safety.

Agreed hours appointed: No. of hours per day: \_\_\_\_\_

d) Fill in the record book during the training period.

Hand in the training record book within 1 month after the conclusion of the training to the Counselling, Training & Placement Office

f) Furthermore the trainee declares that he/she does not suffer from any illness, which could deteriorate as a result of the activities carried out during the training period and if the trainee is pregnant she must declare it at the start or during the training period or after its conclusion, to check compatibility with the activities carried out.



UNIVERSITÀ **DEGLI STUDI** DI BERGAMO internazionali

Servizio orientamento e programmi

Head of counselling, Training and Placement service Tel. 035 2052268 E-mail: elena.gotti@unibg.it

Signature

Host authority/company representative:

Tel E-mail

Address Signature\_

By signing this project, the trainee authorizes the processing of his/her personal data for the purposes of carrying out the training activities according to the legislative decree no.196/2003- Personal data protection code. Signature