Certificate of Internship Participation

Mr. / Ms. .....

Born on ..... in …….....

Was involved in the following practical internship as a student trainee

from ..... to ….....

Place / Laboratory and form of Work	Number of Weeks
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
Total number of weeks:	…….

Leadership: ..... **Industriousness:** ..... **Performance:**.....

Special Comments: .....

.....

.....

.....

Number of days on leave during employment: .....,,,, from that, ... vacation days,

..... sick day, …..... other dys of absence (…….……..……..….).

He/She complied with the work rules without special position

He/She received his/her workbook

also.....

……..... the …. .....

(Place) (Date)

....

Company Stamp) (Signature)