***Appendix No. 3*** *to Rector’s Regulation No. R.0211.16.2022*

*of March 23, 2022*

……………………….

*(Name and surname of the student)*

......................................

*(Album number)*

......................................

*(Institute, field of study, year of studies)*

 **to** ………………………………………..

 ………………………………………..

I would like to request approval and credit – in lieu of a student internship – for my work experience / internship / apprenticeship / voluntary work that I have done at

..................................................................................................................................................

*(name of the company / institution)*

**Description of the company/institution** *(legal form, industry)*

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**Description of the job position**, at which the given work experience / internship / apprenticeship / voluntary work\* was performed *(description of the job position within organizational structure)*

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

............................................................................................................................................. .............................................................................................................................................

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**The nature of the work tasks and activities performed and their link with the learning outcomes realized:**

|  |  |
| --- | --- |
| Learning outcomes resulting from the “Internship” course sheet in the given field of study**\*\***  | Tasks, activities performed during the work experience / internship / apprenticeship / voluntary work\* serving to achieve the assumed learning outcomes |
| Outcome/s in terms of **knowledge** (W): ………………………………….. ………………………………….. ………………………………….. ………………………………….. ………………………………….. …………………………………..  | ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. …………………………………………………………………….  |
| Outcome/s in terms of **skills** (U): ………………………………….. ………………………………….. ………………………………….. ………………………………….. ………………………………….. …………………………………..  | ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. …………………………………………………………………….  |
| Outcome/s in terms of **social competencies** (K): …………………………….. …………………………………. …………………………………. …………………………………. …………………………………. ………………………………….  | ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. ……………………………………………………………………. …………………………………………………………………….  |

\* Delete as appropriate

**\*\*** Course sheets for all subjects, including the “Internship” course sheet, are available from the website at https://planystudiow.uek.krakow.pl/. After entering the appropriate level and field of study, select the semester in which the Student started his/her education (**not** the one in which he/she is doing his/her internship), and then open the timetable (“*siatka godzin*”).

**I have performed these work tasks in the period** from………….……. to …………………

 *(Student’s signature and date)*

**I hereby confirm the course of the work experience / internship / apprenticeship / voluntary work\* as described above, as well as the achievement by the Student of learning outcomes in its duration** (*please select the applicable answer*):

|  |  |
| --- | --- |
| Outcome/s in terms of knowledge (W)  | ☐ has/have been realized by the Student in full☐ has/have been partially realized by the Student☐ has/have not been realized by the student |
| Outcome/s in terms of skills (U)  | ☐ has/have been realized by the Student in full☐ has/have been partially realized by the Student☐ has/have not been realized by the student |
| Outcome/s in terms of social competencies (K) | ☐ has/have been realized by the Student in full☐ has/have been partially realized by the Student☐ has/have not been realized by the student |

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

*(date, stamp, and signature of Internship Organizer)*

|  |  |
| --- | --- |
| **I confirm that the internship has been completed** (credited at ……. ECTS points)  | **The internship has not been completed**  |
|    date ……………. ……………………………..……..  *(signature of Internship Tutor on the part of the CUE)*  |     date ……………. …...………...……………………..  *(signature of Internship Tutor on the part of the CUE)* |