Appendix No. 5

to the Resolution No. …..

of the Council of the Faculty of Law,

Administration and Economics

of …..

…………………………………………………….

stamp of the workplace/institution

(NIP/Regon)

**CERTIFICATE OF COMPLETION OF THE PROFESSIONAL PRACTICE**

Mr./Ms. ................................................................................................................. Student/of the Faculty ............................................................................................ Field of study ......................................................................................................... Degree ..................... year .................. album number............................................. completed the professional practice at.......................................................................

(name of workplace/institution)

according to the established program from ................................. to ........................

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| --- | --- | --- |
| Description of the trainee’s activities | Learning outcomes | Completed/  Uncompleted |
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Conduct of the professional practice: ……………………………………………………………………………………..…………………………………………………………

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Place, date, signature of company internship supervisor...............................................

**Confirmation of the completion of the learning outcomes and completion of the internship by the university supervisor of professional practice**

Place, date, signature.............................................................................................