

.....
name of the Host Institution place, date

.....
street, number

.....
postal code, city/town

.....
phone number

Certificate of student job-specific internship

I hereby certify that a student of the John Paul II Catholic University of Lublin:

(name and surname), student book No.

Faculty, field

(type and level of studies)

from to completed a job-specific

internship at (name of the Host Institution)

at (name of the organisational unit of the Host Institution)

during which he/she achieved the assumed learning outcomes:

(here is a list of the learning outcomes achieved by the Intern, according to the list indicated in the internship journal)

.....
Host Institution's stamp Signature of the Intern's Mentor