



STUDENT INFORMATION

Name	Student number	Group code
Degree programme	Specialization	Credits
Telephone number	E-mail	

TASK DURING THE COMING TRAINING PERIOD

Job Description			
Training period	Training period in weeks	Assessment of training *) Can be accepted as basic training <input type="checkbox"/> Can be accepted as professional training <input type="checkbox"/> Cannot be accepted as practical training <input type="checkbox"/>	Quality of training **) <input type="checkbox"/> routine tasks <input type="checkbox"/> planning, research and development; weeks _____

* The supervising teacher fills in this part

** Employer fills this part

EMPLOYER INFORMATION / INFORMATION ABOUT THE EMPLOYER

Employer		
Street address	Postal code	Postal office
Contact person***	Telephone number	E-mail

***The contact person of the employer familiarizes the trainee with his/her responsibilities.

- The employer and the student draw up an employment contract for a specified period. The duties and obligations for both parties are defined in the contract of employment.
- The employer and the student draw up an agreement of practical training, not an employment contract. The student complies with the general rules and agreed working hours of the workplace.

When under a contract, the student will be covered by the workers' compensation insurance.

The statutory accident insurance for the students is valid in accordance with the study plan practical training and also applies while travelling directly from the educational establishment or the student's apartment to the appointed practical training place and back. The insurance is valid according to the conditions stipulated at the time of concluding the agreement. The insurance is also valid abroad. We still recommend that the student take out a voluntary more extensive insurance for the stay abroad.

The student is to receive a testimonial written by the employer. A copy of the testimonial is to be submitted to the supervising teacher together with the application for approval of practical training.

THE SUPERVISING TEACHER FOR PRACTICAL TRAINING, supports the trainee in performing the duties needed to achieve his/her learning objectives.

The name of the supervising teacher	E-mail	Telephone number
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SIGNATURES

Time and place	Signature of the student
Time and place	On behalf of the employment
Time and place	On behalf of the Vaasa University of Applied Sciences

This agreement is drawn in three copies, one for each part.