

EU-contract

International Association for the Exchange of Students for Technical Experience



Company offering practical experience

1. Company: _____

Org no: _____

2. Postal Address: _____

Visit Address: _____

3. Phone no: _____ 4. Fax no: _____

5. Contact person in the department of human resources: _____

6. Trainee's supervisor: _____

7. E-mail address of supervisor: _____

8. Business/Products: _____

9. Work place: _____

10. Number of employees: _____

11. Daily working hours: _____ From: _____ Until: _____

12. Working hours per week: _____

Qualifications of student

13. Field of study: _____

14. Specialization (if applicable): _____

15. Level of study:
- Beginning (1-3 semesters)
 - Middle (4-6 semesters)
 - End (7 and more semesters)
 - Graduation thesis

16. Language(s) required:	Excellent	Good	Fair
English:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Nationality (if required): _____

