

APPLICATION FOR CREDIT RECOGNITION OF TRAINEESHIP ACTIVITIES

(To be filled in and sent to: traineeship@pegasointernational.eu)

The Undersigned	
Surname:	Name
enrolled in the a.y	of the degree course in
	Student Identification Number
Email Address	Mobile Number
	HEREBY DECLARES
to have undertaken the	aineeship for a total amount of hours equal to months
	AND HEREBY REQUESTS
the recognition of	credits to be recorded in the university academic record as approved
by	on Session no.
	(to be compiled by MED.E.A.)
	SIGNATURE
DATE AND PLACE	
ATTACHMENTS	
Activity report carried	on headed paper), signed and stamped by the company tutor; it during the traineeship hours, signed and stamped by the company tutor; document of the applicant.
	AUTHORISED BY THE BOARD
	