**After the Mobility**

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| ***Table D - Traineeship Certificate by the Receiving Organisation/Enterprise*** |
| **Name of the trainee:**        |
| **Name of the Receiving Organisation/Enterprise:**        |
| **Sector of the Receiving Organisation/Enterprise:**        |
| **Address of the Receiving Organisation/Enterprise** [street, city, country, phone, e-mail address]**, website:**       |
| **Start date and end date of traineeship: [day/month/year] from**   /  /      **to**   /  /       **[day/month/year]**  |
| **Traineeship title:**        |
| **Detailed programme of the traineeship period including tasks carried out by the trainee:**        |
| **Knowledge, skills (intellectual and practical) and competences acquired (achieved Learning Outcomes):**        |
| **Evaluation of the trainee:**        |
| **Date:**       |
| **Name + signature + Stamp of the Supervisor at the Receiving Organisation/Enterprise:**             |