



P O L I T E C H N I K A Ś L Ą S K A

WYDZIAŁ ARCHITEKTURY

UL. AKADEMICKA 7
44-100 GLIWICE
T: +48 32 237 12 10
T: +48 32 237 27 28
F: +48 32 237 24 91
Rar0@polsl.pl

NIP: 631-020-07-36 / REGON: 000001637 / ING BANK ŚLĄSKI SA O/GLIWICE / NR RACHUNKU: 60 1050 1230 1000 0002 0211 3056

**TRAINING AGREEMENT and QUALITY COMMITMENT FOR THE TRAINEE
FROM THE FACULTY OF ARCHITECTURE, SILESIAN UNIVERSITY OF TECHNOLOGY,
GLIWICE, POLAND**

Academic year:

I. DETAILS OF THE STUDENT

Name of the student:
.....

Subject area of current studies: Architecture and Urban Planning

Degree the student is studying for: BSc in Architecture and Urban Planning

II. DETAILS OF THE PROPOSED TRAINING PROGRAMME ABROAD

Host organization (*name, address, contact details*):
.....
.....

Period of traineeship placement: from to total: months

Knowledge, skills and competence to be acquired:
.....
.....
.....

Detailed programme of the training period:
.....
.....
.....

Tasks of the trainee:
.....
.....
.....

Monitoring and evaluation plan:
.....
.....
.....

III. COMMITMENT OF THE THREE PARTIES

Student:	
Signature	Place & Date:
Sending institution: Silesian University of Technology We confirm that this training programme agreement (TA) of our student is approved. On satisfactory completion of this TA, our institution will award student with 22 ECTS credits.	
Faculty/Course Coordinator name & signature (if applicable)	Place & Date:
Host organisation: We confirm that this training programme agreement (TA) is approved. Our organisation will issue appropriate Certificate for the student on its(TA's) completion.	
Traineeship Coordinator's name & signature	
Place & Date:	