Liceo Bertrand Russell
via 4 novembre 35 – 38023 Cles (Trento)
(+39(0)463 424049
segr.russell@scuole.provincia.tn.it
russell@pec.provincia.tn.it
www.liceorussell.eu
Codice fiscale 01827760222

ATTENDANCE REGISTER - CURRICULAR INTERNSHIP

Name and surname of student _____ **Class** _____

Name and surname of tutor _____

Place of internship _____

Period of internship _____

DATE	SCHEDULE	STUDENT'S SIGNATURE	TUTOR'S SIGNATURE	NOTES: absences, arrived late/left early

Total hours _____

Date _____

Stamp and signature of the host company

_____

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Final certificate of internship's attendance

I certify that the curricular internship has taken place.
I confirm that the program outlined in the Internship Project was carried out.
Description of the experience (divided into basic or transversal competences, if possible):

_____

_____

_____

_____

_____

_____

Date _____

Stamp and signature of the host company

_____

Liceo "Bertrand Russell" - Cles

_____

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EVALUATION SHEET

Name and surname of student _____ **Class** _____

Name and surname of tutor _____

Place of internship _____

Period of internship _____

Organization's tutor _____

COMPETENCE	EVALUATION				
A) Punctuality and respect of the organization's rules	**1**	**2**	**3**	**4**	**5**
B) Understanding of how the organization works and how it is structured	**1**	**2**	**3**	**4**	**5**
C) Understanding and application of the ruling safety measures and respect of the rules regarding privacy	**1**	**2**	**3**	**4**	**5**
D) Respect of the various learning environments and understanding of how to relate to others	**1**	**2**	**3**	**4**	**5**
E) General behaviour and willingness to learn	**1**	**2**	**3**	**4**	**5**
F) Precision in carrying out an assignment	**1**	**2**	**3**	**4**	**5**
G) Ability to work in a group	**1**	**2**	**3**	**4**	**5**
H) Interest and participation	**1**	**2**	**3**	**4**	**5**

1= laching/insufficient
2=sufficient
3=fair
4=good
5=excellent

Final evaluation _____

_____

_____

_____

Observations _____

_____

_____

_____

date _____

Organization's tutor _____

Stamp and signature

PARTE RISERVATA AL CONSIGLIO DI CLASSE

Osservazioni del consiglio di classe:

_____
_____
_____
_____
_____
_____
_____
_____
_____

Voto finale:

_____

data_____ Coordinatore di classe _____