



UNIVERSITÀ DEGLI STUDI DI NAPOLI FEDERICO II

Training Activity

THE TRAINEE

Name: Surname:

Fiscal Code: University Registration Number:

Born in: City on:

Address: City Tax Code

Phone numb. Mobile numb.

E-mail

THE TRAINEE POSITION

STUDENT ⁽¹⁾ enrolled for the AY At the year

Course:

Department:

Student with disabilities

THE HOST

Name of the Company or Institution:

Address of the Institute:

Address where the training activity takes place (if different from the address above):

Phone numb.: Fax: e mail:

SUPERVISOR

SUPERVISOR APPOINTED BY THE HOST

Name and Surname:

Phone numb.: Fax: email

SUPERVISOR APPOINTED BY THE UNIVERSITY

Name and Surname:

Phone numb.: Fax: email:

TRAINING ACTIVITY

OBJECTIVES:

.....

Reference period: N° months: N° hours: starting from:

¹ Students, PhD Students or Further Training Courses Students.

ECTS required for the training activity.....

BENEFIT GRANTED:

TRAINEE’S OBLIGATIONS:

- 1) Follow the directions of the tutors and refer to them for any organizational issues or other matters;
- 2) Compliance with the rules concerning the hygiene, safety and health in the workplace, as well as accident prevention and emergency measures adopted by the host organization and anything prescribed by your Host;
- 3) Maintain the necessary confidentiality and not disclose to any third party without the prior consent of the host organization, information, documents and/or knowledge during the internship;
- 4) The obligation of confidentiality is extended beyond the duration of the placement.

According to the D.Lgs 196/2003 (art. n°13)

The above data are used for purposes related to this training project by data controllers. The acquired personal data processing is performed in automated mode and/or on paper. The data acquisition is necessary because any refusal by the University will make it impossible to proceed (data transmission). The personal data provided will not be disclosed to the public and/or private subject implementation of Decree 196/2003. In no case will the data be diffused. You may exercise your rights under art. 7 of Decree 196/2003. demanding to know the names of the persons responsible for data processing, to access their data for them, check to ensure correctness, request updating, rectification, integration, cancellation of data. The owners of data processing are the promoter and the host organization.

Date.....

Signed by the trainee to acceptance (1)

.....
 (name and surname in block letters)

Signed by the Supervisor of the University (2):

.....

Signature and stamp of the Host Supervisor (3) _____

¹⁻² Handwritten signature replaced by a print of the registrant, in accordance with art. 3 paragraph 2 of Decree No 39/1993

³ Signature of the legal representative or those in the delegation