UNIVERSITÀ TELEMATICA
INTERNAZIONALE UNINETTUNO

International Telematic University UNINETTUNO
Psychology Faculty

(Post-Degree) Professionalizing Training and Orientation Project And Activation of a New Board

PLEASE FILL IN THE FORM IN ELECTRONIC FORMAT

Trainee's name .....……..
Born in ..... on the .....……
Residing in .....Fiscal Code .....…… Tel. ……
Enrolled in the Degree Course: ……...

Hosting Company/Board .....……VAT n° …….
Traineeship placement.....…….
Hosting Company/Board's legal representative ……..
Born in ..... on the .....……
Residing in ..... Fiscal Code .....……..
Tel. ……. E-mail……..
Access timing to company premises: .....……
Traineeship period: .....……. months
Total hours: ……
From the .....……. to the .....……

Company tutor: .....……...

Insurance policies
* INAIL Work accidents << management of State's behalf >> as per art. 2 of the Decree of the President of the Republic n° 156/99
Number of INAIL policy: 22068166/95

Insurance company: Benacquista Assicurazioni - Insurance policy n° **27534**

Traineeship objectives and modes:
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Trainee's obligations
- Follow the directions of the tutors and refer to them for any organizational needs or other eventualities;
- Abide by obligations of confidentiality about production processes, products or other company-related news of which he gets to know, both during and after the course of the traineeship;

* Comply with company regulations and health and safety standards.
* Provide periodic reports to the hosting party and prepare a report at the conclusion of the training period, to be delivered to the hosting party.
* Notify the tutor of any suspensions or impediments that have made it impossible to carry out the traineeship.

(For acknowledgement and acceptance) The Trainee .....…….
(Company/Board stamp) .....….

* **Reporting of any injuries to INAIL is the responsibility of the hosting party**

PROFESSIONALIZING TRAINING PROJECT

Trainee's name ..... born in .....

On the ..... Residing in ..... Fiscal code

..... graduated in Psychology on the: ..... at the University of

……

Hosting Company/Board .....

Traineeship placement (organizational sector) .....

Access timing to company premises .....

Traineeship areas:

[ ] clinical psychology
[ ] general psychology
[ ] social psychology
[ ] developmental psychology

Traineeship objectives:

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Activities planned to carry on the traineeship:

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Skills to be developed during the traineeship:

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(For acknowledgement and acceptance) The Trainee …….....
(Signature of the Tutor appointed by the Board (Registered Psychologist).....….