

Kielce,

.....
Student's name and surname

PESEL:

.....
Residential address

Phone number:

Field of study:

Internship Coordinator

.....

Request for approval

I kindly request your approval to complete a four-week student internship at the following organization:

.....
Name and address of the workplace and place of internship

.....
Name and surname of the person representing the plant and contact details (e.g. telephone number) – *for signing the Agreement between University and the Workplace*

.....
Name and surname of the person responsible for supervising the trainee on behalf of the company (*if known at the time of application*)

.....
start and end date of the internship

Sincerely

.....
student's signature

