| Order No.        | 6/08/2023 of the Rector of Vistula University |
|------------------|---|
| August 11, 2023, | regarding the Student Internship Regulations  |

| ,  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
| Certificate of completion of professional student internship                                     |  |  |  |  |
|  |  |  |  |  |
| (Student ID No) student of Business Analytics and Security on the I degree level                 |  |  |  |  |
| conducted in full-time/part-time* mode at the Faculty of Business and International Relations of |  |  |  |  |
| Vistula University, during the period from to at the Workplace                                   |  |  |  |  |
| (Stamp or name and address of the Company/Institution):  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| completed a professional student internship totaling hours.                                      |  |  |  |  |
| Independently completed, performed the following tasks:  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Additionally, participated in the following tasks/activities:                                    |  |  |  |  |
|  |  |  |  |  |

\*Strike out incorrect







## Akademia Finansów i Biznesu Vistula Grupa Uczelni Vistula

| Characteristics of the s<br>1. Strengths | student that the Workplace              | e Supervisor of Internships of  | considers to be:       |
|--|---|---------------------------------|------------------------|
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  | • |                                 |                        |
| 2. Weaknesses:                           |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  | •••••                                   |                                 | •••••                  |
| Proposed final grade f                   | or Mr /Ms                               |                                 |                        |
| Troposed final grade i                   | OI WII./WIS                             |                                 | ••••••                 |
| (on a scale of $2.0 - 5.0$               |   |                                 |                        |
|  | (number)                                | (in words)                      |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  |   |                                 |                        |
|  | Stamp and singet-                       | o of the authorized pages       |                        |
|  | Siamp ana Signatur                      | e of the authorized person repr | esenting the workplace |





