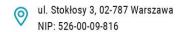


## Application for crediting professional student internship based on activities performed within own business activity

(active business conducted for a minimum of 1 year)

,
Dean of the Faculty of Computer Science, Graphic Design and Architecture
student's full name
student's ID number and semester of studies
I am a I degree/II degree* student in the field of Computer Science, specialization
I am requesting the crediting of the professional student internship based on activities
performed within my own business activity aligned with the field of study.
I hereby declare that I have been running my own business since (start date of business)
and have performed tasks that align with the professional student internship
program corresponding to my field of study, totaling hours.
Company details (name, address, phone number, email; NIP, KRS):
Description of conducted business activity:







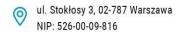




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Description of tasks performed within my own busines	ss activity:
	Student`s legible signature

\*strike out incorrect









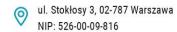


	(location, date)
(company stamp)	

## **STATEMENT**

## on achieving learning outcomes included in the student professional internship program

I hereby declare that I:,
born on, residing at
,
conduct business under the name::,
registered in the National Court Register (KRS) under number, Tax Identification
Number (NIP):
During the course of conducting my business activities, I achieved the following professional internship objectives (as defined in the internship program):
While performing tasks within my own business activities, I achieved the following learning outcomes for the professional internship in the field of <i>Computer Science</i> (particularly in terms of skills and social competencies):
- in terms of knowledge











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in terms of skills	
in terms of social competencies	
•	
Name and surname, Student ID No.	Date and student's legible signature
Decision of the Academic Super-	visor of Professional Student Internships
	internships based on activities performed within e field of study.
emester ( hours) grade (	scale 2,0 - 5,0): (in words)
Date an	nd signature of the Academic Supervisor of Professional Student Internships
COMMENTS:	
Attachments to the application for crediting the heir own business activities aligned with the fie	internship based on activities performed within eld of study:
. Current (matching the application submission	date) certificate from the Central Register and confirming: contact details, subject and scope of

