

....., date

**Employer's opinion on the course of employment or other professional activities
(to be credited towards professional student internships)**

It is certified that Mr./Mrs.,
(Student ID No.....) student of (field of study),
at the **1st / 2nd degree*** program, **full-time/part-time*** studies at the Vistula University in Warsaw
in the period from to, he/she performed tasks and actions
within the scope of professional student internships for a total of hours, as part of:
(please mark the appropriate option)

professional work; volunteering; participating in an intership at:

.....
(position or job title)

.....
(name of the company)

.....
(address)

.....
(NIP No or REGON No)

.....
(phone number)

.....
(e-mail address)

Scope of duties performed by the employee during the employment:

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Employee's strengths and weaknesses:.....

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.....

Grade for tasks performed by the employee (scale 2.0 – 5.0):
(numeral) (in words)

.....
Company stamp, date and signature of an authorized person in company

* cross out if not applicable