

## Szkoła Główna Turystyki i Hotelarstwa Vistula

Grupa Uczelni Vistula

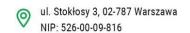
Warsaw.	 

## APPLICATION FOR CREDITING VOCATIONAL TRAINING BASED ON STUDENT'S PROFESSIONAL ACTIVITY AND STUDENT'S DECLARATION

## DEAN OF THE FACULTY OF TOURISM AND RECREATION VISTULA SCHOOL OF HOSPITALITY student's name and surname and album number I am a student of ...... semester of **First/ Second cycle\*** studies in the field of ....., specialty..... with a practical profile, full-time/part-time\* at the Faculty of Tourism and Recreation of the Vistula School of Hospitality in Warsaw. I hereby apply to the Faculty Dean for crediting the activities carried out within my professional activity in line with my field of study as vocational training. I hereby declare that in the period from \_\_\_\_\_\_ to \_\_\_\_\_ I performed activities covering the scope of Vocational Training in the amount of ......... hours in the form of (mark the appropriate item): □ professional work; □ own business activity; □ volunteering; □ participation in job placements; □ other of a special character (please indicate the type)..... in accordance with the field and profile of studies, consisting in: ..... (name or job description) (name of institution) (address) (city) I performed the following activities:

\*delete as appropriate

Appendix: Opinion on the course of employment, volunteering or job placement or a document confirming the student's business activity.









student's legible signature

## INFORMATION ON THE ACHIEVED LEARNING OUTCOMES SPECIFIED IN THE STUDENT INTERNSHIP PROGRAM

Goals of internships achieved during professional work (as part of other activities):
The most important learning outcomes achieved by the student during work or other activities (describe in particular the outcomes in the scope of skills and social competencies):
- knowledge
- skills
- social competencies
date and signature of the student
Decision of the Field Supervisor of Vocational Training
I award a credit/I do not award a credit* for the Vocational Training in the following dimension
Semester (number of hours) grade (scale 2.0 – 5.0):
(in digits) (in words)
date and signature of the Field Supervisor of Vocational Training COMMENTS:





