**(TO BE WRITTEN ON HEADED PAPER)**

**LETTER OF ACCEPTANCE FOR TRAINEESHIP**

**[Notice for the contact person in the host organisation:** Please copy the text below onto the official **headed paper of the host organisation. Please delete this notice before filling the letter out.]**

Our organisation:

LEGAL NAME: XXXXXXX

LEGAL ADDRESS: XXXXXXX

Post code – City : XXXXXXX

Country: XXXXXXX

Telephone : XXXXXXX

Website : XXXXXXX

Contact person’s name: XXXXXXX

Number of employees below 250 : YES/NO

We, the undersigned, hereby declare to accept the student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the

University of Brescia (Italy) from\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_for training purposes.

The training activities are planned as follows :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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During his/her stay the student will be supervised by Mr/s.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (email:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_).

Head of the office/department

(date, stamp and sign) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_