EMPLOYER'S CERTIFICATE

EMPLOYER'S DATA	
Name of the Employer	
Address	
Tax number	
Name and title of the Employer's representative	

EMPLOYEE'S DATA	
Name	
Neptun ID	
Training Programme	

EMPLOYMENT DATA	
Position	
Job description (list of tasks in 2-3 sentences)	
Starting date	
Ending date	
Daily working hours	

This Employer's certificate was issued for university internship administration.

Date:……………………………………

……………………………………………………………

Employer's signature and stamp