

Opole,

The Office of Academic and Student Affairs kindly requests your consent to allow

.....,
(Student's full name)

a student of the **2nd** year of full-time programme: **II English Philology**, complete a **3-week** internship in your Company/ Institution/ Unit.

An official agreement will be signed after receiving your consent, i.e. after completing the application form and submitting it to the Office of Academic and Student Affairs.

<i>Student's full name</i>	
<i>Full name of the receiving entity:</i>
Company's address:	town: code: street: voivodeship: phone:
Dates of the internship	
II English Philology Full-time studies	<i>Internship supervisor's full name:</i>
<i>Acknowledgment of admission</i> - <i>Signature of authorized person:unit (company) stamp</i>	
<i>Accepted by coordinator</i>	

.....
(student's full name)

Opole,

.....
phone)

**STATEMENT OF A STUDENT OF THE UNIVERSITY OF OPOLE
on reading the Rules of the organization of student internships**

I, the undersigned:, residing at

.....,
a student of the University of Opole, hereby declare that before commencing the internship I have familiarized myself with the contents of the Rules of the organization of student internships, which I confirm with my own signature.

.....
(student's legible signature)

* Delete as appropriate