NYÍREGYHÁZI EGYETEM
UNIVERSITY OF NYÍREGYHÁZA

Institute of Business Administration

PROFESSIONAL PRACTICE CERTIFICATE

BUSINESS AND MANAGEMENT BSC

Student's name: _____

Student's Neptun code: _____

Name and address of host institution: _____

Host instructor's name and email: _____

Duration of the internship: (start and end date of the practice) _____

Short textual evaluation of the student's work: (maximum 1500 characters); his/her relationship with clients and the institution's staff, his/her work ethic; the strengths, weaknesses, and development trends of his/her personal and professional competencies.

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Date: _____

_____ student's signature

_____ host instructor's signature and stamp