| DECLARATION OF THE START OF THE TRAINEESHIP |
| --- |

I undersigned, *(name and surname of the Legal Representative of the hosting organization),* Official Contact Person of *(official name of the hosting company)* located in *(full legal address)*

DECLARE THAT

*(name and surname of the student beneficiary)* has regularly started the Traineeship on the \_\_\_(date)\_\_\_\_\_\_ according to the Learning Agreement, Acceptance Letter and the Contract.

Yours faithfully, \_\_\_\_date\_\_\_\_\_\_\_

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

*(Signature of the Official Contact Person of the hosting organization)*
Stamp of the hosting company (if available):