

John Paul II Catholic University of Lublin

Faculty

field:, studies..... *

Internship journal

.....

name and surname of the Intern

.....

student book number

Faculty's stamp

Signature of the Internship Supervisor

**form (full-time, part-time) and level (BA/BSc, supplementary MA/MSc and uniform master's studies) of education*

Compulsory internship

Host Institution

address:
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.....

Name of the organisational unit/units of the Host Institution in which the Intern is undergoing the internship:

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Intern's Mentor

Name and surname:

Function / position:

Internship commencement date:

Internship end date:

Host institution's stamp Signature of the Intern's Mentor

Instructions

Detailed rules and instructions for internships resulting from the curriculum, as well as the conditions for being awarded credits for internships are specified in the Internship Regulations approved by the Rector of the Catholic University of Lublin.

Number of hours of the internship:

Learning outcomes to be achieved through the internship*

Outocme symbols	Content of the outcome	Reference to the field-related outcome (symbol)
In the field of knowledge		
P_W1	He knows the principles of occupational health and safety, has knowledge of the basics of ergonomics specific for the place of an internship	K_W09
In the field of skills		
P_U1	Carries out simple biological or chemical experiments	K_U05
P_U2	Performs activities related to the internship with the correct use of knowledge	K_U07
P_U3	Is able to explain and interpret the basic chemical and physicochemical phenomena with which he / she comes into contact during the internship	K-U14
In the field of social competences		
P_K1	Actively participates in discussions on issues with which he /she has contact during the internship, using the appropriate nomenclature	K_K04
P_K2	Understands and adheres to regulations concerning the protection of intellectual property and intellectual integrity in work	K_K07

*For the field / specialisation / major to be prepared the Internship Supervisor on the basis of the learning

outcomes approved by the Senate and to be made available to students for printing; the number of rows of the table should be changed depending on the needs

INTERNSHIP RECORD¹

Date ² and number of hours	Description of the work performed, duties entrusted and functions performed	Reference to the expected learning outcomes ³	Confirmation of the achievement of the expected learning outcomes and signature of the Mentor	Notes
1	2	3	4	5
			I confirm / do not confirm	

¹ Columns 1-3 to be filled by the Intern, columns 4-5 to be filled by the Intern's Mentor, the number of rows of the table should be changed depending on the needs

² In the case of repeatability of the performed work and functions, it is possible to present the entrusted duties in a weekly system

³ The tasks carried out must relate to all learning outcomes shown in the instructions

Intern's name and surname, student book number

Descriptive assessment by the Intern's Mentor

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date and signature of the Intern's Mentor

Descriptive assessment by the Internship Supervisor

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date and signature of the Internship Supervisor