I, the undersigned Mr./Ms. ...................................................... I certify that I commit as a partner to participate in the project:

**"Integrated Programme for the Development of the John Paul II CatholicUniversity"**

applied within the framework of the National Centre for Research and Development competition no. POWR.03.05.00-IP.08-00-PZ1/18. The projectis co-financed from European Funds - European Social Fund, within the framework of the Operational Programme Knowledge Education Development, priority III, activity 3.5 Comprehensive programmes of higher education institutions.

I undertake to accept ...................................... *(student'sfirst and lastname)*from the John Paul II CatholicUniversity of Lublin in Poland for an internship from ............................*(date/month/year)* to .....................*(date/month/year) (duration 16 weeksbetween4 October 2021 and 30 June 2022)*

at ............................................................... .............................. *(name and address of host company/organization)*, registered in *(country)*......................................., no. …….......................; VAT no. ...........................

General jobdescription: ..........................................................................................................................

Tasks will include:

1. ...............................................................................................................................................................

2. ...............................................................................................................................................................

3.................................................................................................................................................................

Requirements for candidates *(please also specify language requirements - minimum B1)*:

1. ..............................................................................................................................................................

2. ..............................................................................................................................................................

3. ..............................................................................................................................................................

Mentor/trainee contact person:

....................................................................................................................................................................*(please write your name, position, address with phone number and e-mail).*

The costs of organizing the internship are financed by the project *"Integrated Development Program of John Paul II Catholic University"* and by the student himself/herself (the host company/organizationmayprovideadditionalfinancialormaterialcontribution for the student).

…….……………………………..

*Seal and signature*