**TRAINING AND ORIENTATION PROJECT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| (Agreement n. |  | signed on |  | ) |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Trainee | | | |  | | | | | | | | |
|  | | | | | | | | | | | | |
| Place of birth | |  | | | | | Date of birth (day/month/year) | | | | |  |
|  | | | | | | | | | | | | |
| Residing in (city/town) | | | | |  | | | | Address | |  | |
|  | | | | | | | | | | | | |
| Tax code/S.S.nr. | | |  | | | Matr. n.° | |  | | Enrolled in (degree or post-degree specialization course) | | |
|  | | | | | | | | | | | | |
| on: |  | | | | | | | | | | | |

Current situation (tick or check the appropriate box):

|  |  |  |  |
| --- | --- | --- | --- |
| Student enrolled in a degree course |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Student taking post-degree specialization courses /master’s degree courses |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Student with a doctorate programme research grant |  |  |  |

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| --- | --- | --- | --- |
| Unemployed University Graduate |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Any physical handicaps? | yes |  | no |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Host company |  | | | | | | | | | Training Location | | | |  | | | |
|  | | | | | | | | | | | | | | | | | |
| Address (of training) | | |  | | | | | | | plant/department/office | | | | |  | | |
|  | | | | | | | | | | | | | | | | | |
| Access hours to company premises: | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Training period: n.° hours | | | |  | n° c.f.u. | |  | | n° months | |  | From |  | | | to |  |
|  | | | | | | | | | | | | | | | | | |
| Tutor nominated by the University of Urbino | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Company Tutor | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Training objectives and methods | | | | |  | | | | | | | | | | | | |
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*Insurance Policies*:

Workplace Accident insurance (INAIL): MANAGEMENT ON BEHALF OF THE STATE

Cumulative accident insurance: AXA Assicurazioni S.p.A.

Civil liability policy: UnipolSai Assicurazioni S.p.A.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Planned Business Trips and/or transfers | | NO |  | YES |  | If yes please specify the reason |  |
|  | | | | | | | |
| Any benefits foreseen for the trainee: |  | | | | | | |

Trainee’s obligations:

1. Follow the tutors’ instructions and refer to them for advice on any organisational requirements or other needs.
2. Comply with the confidentiality obligations regarding any production processes, products or other company information learned both during and after the training course.
3. Comply with company regulations, and hygiene and safety laws.

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| --- | --- | --- | --- | --- |
| Urbino, |  |  | Trainee Signature |  |

|  |  |  |  |
| --- | --- | --- | --- |
| (company official stamp) |  | Signature for the Company |  |
|  |  |
| Signature for the University |  |
|  |  |