header stamp of the entity where the intership was done ………………..…………………………

 place, date

**CERTIFICATE**

We hereby inform that Mr. / Ms. ……………………………………………………………….. has completed their professional internship consistent with the planned discipline of education at the CUT Doctoral School (discipline: architecture and urban sciences)\* in the period:

\_ \_ . \_ \_ . \_ \_ \_ \_ – \_ \_ . \_ \_ . \_ \_ \_ \_
(dd.mm.yyyy – dd.mm.yyyy)

During the internship, Mr. / Ms. ……………………………………………………………………. realised the following works:

…………………………………………………………………………..……………………………….. …………………………………………………………………………..……………………………….. …………………………………………………………………………..……………………………….. …………………………………………………………………………..……………………………….. …………………………………………………………………………..……………………………….. …………………………………………………………………………..……………………………….. …………………………………………………………………………..……………………………….. …………………………………………………………………………..……………………………….. …………………………………………………………………………..………………………………..

Notes:

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 ………………………………………

Signature and stamp of the person authorised

to supervise internships

in the area of architecture and urban sciences

\* Education at the CUT Doctoral School in discipline: architecture and urban sciences may only be undertaken by a person who has completed a professional internship of no fewer than 6 months compliant with the requirements specified in the recruitment conditions.