



Servizio Post Laurea
UOC Post Laurea

Collective convention n. stipulated on with deadline

EDUCATIONAL TRAINING PROJECT INTERNSHIP

PROMOTER

University of Pavia
Corso Strada Nuova, 65
27100 Pavia (PV)
ITALY
Tax Code n° 80007270186
VAT n° 00462870189

INTERN

Surname and name _____
Tax Code n° _____
Citizenship _____
Born in _____ On _____
Resident in via _____ Postal code _____
Town/city _____
Domicile (if different than residence) in via _____ Postal code _____
Town/city _____
Mobile phone _____ Home phone _____
E-mail _____
Student identification n° _____ Course of study _____
Course name _____

HOST

Host institution _____
VAT n° _____

Legal address:

Street _____ Postal code _____

Town/city _____ Prov. _____

Country _____

Location of internship:

Street _____ Postal code _____

Town/city _____ Prov. _____

Country _____

Legal status:

Public administration (art.1 c.36 L.92/2012) other subject

ATECO activity code _____

Administrative contact for the internship:

Surname and name _____

Office _____

E-mail _____

Telephone _____ Fax _____

Employment contract:

Insert CCNL applied by the host institution _____

INTERNSHIP MANAGEMENT

Tutor of promoter:

Surname and name _____

E-mail _____

Telephone _____

Company tutor:

Surname and name _____

E-mail _____

Telephone _____

Role within the company _____

Position (*options*) _____

PAYMENT FOR PARTICIPATION

Provided for Not provided for

Insert gross monthly amount: _____

Meal coupon

Canteen service

REIMBURSEMENT FOR JOB-RELATED EXPENSES

Insert detailed description of any expenses to be reimbursed for.

OBLIGATORY INSURANCE GUARANTEES

According to the law, the University of Pavia guarantees its students and employees appropriate INAIL protection against accidents through the mechanism of "management on behalf of the State" and adequate insurance coverage for risks deriving from Civil Liability (Policy n. 178262860 – Company: UNIPOL SAI Assicurazioni).

A further additional insurance is available to regularly enrolled students for injury risks (Policy n. 406392448 – Company: AXA).

For further information and follow up:

<http://wcm-3.unipv.it/site/home/ateneo/amministrazione/direzione-generale/servizio-legale/articolo1430.html>

OBJECTIVES AND IMPLEMENTATION OF INTERNSHIPS

Length (*n° months*)

Starting date (*scheduled starting date*) _____

Ending date (*scheduled ending date*) _____

Schedule/breakdown in hours (*indicate the daily and weekly hours in accordance with the collective contract applied by the host organization*).

AREA IN ORGANIZATION AND INTERNSHIP TASKS

Briefly describe the area in the organization where the internship will take place (for example: sector, division, office; brief description of activities to undertake in this area, etc.).

INTERNSHIP ACTIVITIES

Briefly describe the internship activities.

OBLIGATIONS and COMMITMENTS OF THE ORGANIZATION/COMPANY - The Host:

- 1) is committed to communicating to the university tutor the number of hours completed by the intern;
- 2) shall collaborate with the promoter to evaluate and certify the results of the intern's activities;
- 3) must comply with the existing health and safety regulations regarding the workplace and to provide the appropriate training regarding health and safety at the workplace;
- 4) must comply with the regulations in law n. 68 (1999) and subsequent modifications and additions;
- 5) in the event of injury and accidents during the internship, the host must report the event, within the time called for in existing law, to the insurance companies indicated in the present plan, referring to the number of the policy and to the promoter.

At the end of the internship the Host is committed to issue a short final report about the lenght (n° of hours of attendance) and the activities of the internship, that must be delivered to the Master's Tutor Promoter together with each intern's timesheet.

With the signing of the present Educational Plan, the intern, promoter and host declare:

- that the information contained in the Educational Plan conforms to article 47 of D.P.R. 28/12/2000 n. 445, and that they are aware of the criminal responsibilities in the event of any false statements or presentation of documents which are false or contain false information under article 76 of D.P.R. 28/12/2000 n. 445;

- their consent, under legislative decree 30 June 2003, n. 196, to the use, even automatized, of the personal data contained in the present Educational Plan, including its communication to third parties chosen solely for the purpose of and limited to the correct implementation of the internship, by the promoter and the host and, for the purpose of control and monitoring, by the Lombardy Region, except for what is set forth in article 7 of the legislative decree of 30 June 2003, n. 196.

Internship project approved by the university tutor Prof./Dott. _____

(signature) _____

Intern

Surname and name

(signature) _____

Host

Name of host organization

(signature) _____