PRACTICAL EVALUATIVE INTERNSHIP TRAINING PROJECT Master's Degree in Psychology (LM-51)

(Agreement n°	date	d

PROMOTER

University of Campania LUIGI VANVITELLI, located in Caserta, 81100, at Viale Abramo Lincoln n. 5, C.F. e P. I.V.A. n. 02044190615, website www.unicampania.it, pec protocollo@pec.unicampania.it, represented by the Rector protempore Prof. Giovanni Francesco Nicoletti, born in San Giovanni in Fiore (CS) on 20.01.1964.

TRAINEE					
Surname	Name				
Date and place of birth					
Fiscal code					
Permanent address					
Phone number e-mail a	ddress				
Registration number 9 digits	Handicapped yes □ no □				
TRAINEE'S UNIVERSITY POSITION					
Enrolled inyear of the course of¹	academic year				
in ² ————————————————————————————————————	–Major				
Department of					
HOST INSTITUTION					
Name					
Location of Internship					
Access times (days and times)					
TUTOR					
The University Tutorundertakes to maintain confidentiality regarding the information, documents and/or knowledge that he/she comes into possession of during the collaboration covered by the activities in question and to maintain the utmost confidentiality regarding the same.					
	Signature				
Professional Tutor	Signature				

¹ Specify whether it is Bachelor's Degree, Master's Degree, Single Cycle Master's Degree, Master, Ph.D., non-medical Postgraduate School.

² Name of the Course.

INTERNSHIP INFORMATION			
Objectives and methods of the project			
Duration			
n° monthsfromto			
minimum number of hours			
minimum number of Credits to be acquired			
Special terms			
INSURANCE COVERAGE			
Accidents at work: INAIL – Management on behalf of the State – T.U. n.1124/1965 - PAT INAIL			
99992000 Accident Policy: Company POSTE ASSICURA SPA - Policy n. 79910 – expiration. 31.08.2026			
RCT policy: AXA ASSICURAZIONI insurance company - Policy no. 407407904 - expiry date 31/08/2026			
RSMO policy for outgoing subjects - EUROP ASSISTANCE Company - Policy no. 40001Q - expiry date 31/08/2026			
TASKS OF TRAINEE			
During the period of internship, the trainee has: a. to follow the activities indicated by the tutor;			
a. to follow the activities indicated by the tutor;b. to observe the rules to preserve his/her safety and that of other people;			
c. to maintain the necessary confidentiality regarding data, information or knowledge acquired during the training period;			
 d. to attend the facilities within the time and in the manner provided for in the training and orientation project, respecting the agreed working hours and environment, rules and models of behavior; 			
e. to fill in the logbook of the activities carried out, given to the trainee by the Promoter.			
Duite as Dalias			
Privacy Policy			
ne above data are used for the purposes related to this training project by the Data Controllers. The Processing of the personal d			
equired is carried out: in automated mode (data management by IT tools) and/or in paper mode (collection, recording, storage, use ocuments by means of files, cards, binders, and archives). The provision of data is necessary as any refusal will make it impossible for			
omoter to proceed with the performance of the above tasks. The personal data provided will be communicated to public and/or priv			
tities only when this is required by current legislation. Under no circumstances will the data be disseminated. The data controllers			
e Promoter and the Host.			
Signature of the Trainee for acknowledgment and acceptance			
Stamp and signature of the responsible of the Host Structure ⁴ ————————————————————————————————————			
Stamp and signature for the Promoter ⁵ ————————————————————————————————————			

⁴ Signature of the legal representative or his/her delegate.
⁵ Signature of the Director, or his/her delegate, of the Didactic Structure to which the trainee belongs