



Erasmus+

TO BE COMPLETED AND SIGNED BY THE AUTHORIZED PERSON IN THE HOST ORGANISATION/INSTITUTION

# ERASMUS+ STUDENT PLACEMENT 2023/2024

## FINAL REPORT ON STUDENT'S FULFILMENT OF TRAINING AGREEMENT WITH EVALUATION

Name of student.....

Name of the host organisation/institution.....

Address of the host organisation/institution.....

Name and position of Placement Coordinator.....

Period of student placement: from .....(day/month/year) to .....(day/month/year)

Questions	Placement Coordinator's responses	Percentage (total 100% in each question)	Other comments
Attitude towards work	Self-employment		
	Initiative		
	Responsibility		
	Speed of work		
	Involvement		
	Planning		
Social skills	Contact with staff members		
	Contact with executives		
	Contact with external people		

	Adaptation to organisational rules		
Personal qualities	Flexibility		
	Creativity		
	Criticism towards own work		
	Willingness to revise own work and attitude		
	Persuasiveness		

Questions	Placement Coordinator's responses	Choose a response	Other comments
Benefits to organisation/institution in hosting foreign student	Different point of view	<input type="checkbox"/>	
	Cultural aspects	<input type="checkbox"/>	
	.....	<input type="checkbox"/>	
	.....	<input type="checkbox"/>	
	.....	<input type="checkbox"/>	
Ability of performing given tasks	Excellent	<input type="checkbox"/>	
	Very good	<input type="checkbox"/>	
	Good	<input type="checkbox"/>	
	Average	<input type="checkbox"/>	
	Low	<input type="checkbox"/>	

**What kind of difficulties (if any) student had during placement in the host organisation/institution?**

**In which kinds of activity student has participated in the host organisation/institution? (please write the main tasks and programme of training period):**

.....  
Date

.....  
Signature and stamp of Placement Coordinator  
at the host organisation/institution