



WORKPLACEMENT TRAINING. WEEKLY TASKS SHEET

(Page/.....)

Week from to (month)..... , 20...	
VET school center:	Collaborating company:
Teacher´s name:	COMPANY SUPERVISOR:
Student´s name:	VET OFFICIAL PROFFESIONAL DEGREE:
	LEVEL:

DAY	TASK PERFORMED / JOB TRAINING	TIME USED	COMMENTS
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			

THE STUDENT	TEACHER	COMPANY SUPERVISOR
Signature:	Signature:	Signature: