MIUR AFAM ISIA



Ministero dell'Istruzione, Università e Ricerca Alta Formazione Artistica, Musicale e Coreutica



ERASMUS PLUS MOBILITY FOR TRAINEESHIP

MID-TERM REPORT

To be completed at the beginning of the second half of the traineeship

| Official name of the receiving organization/enterprise: | | | | | | |
|---|---|--|--|--|--|--|
| Address of the receiving organization/enterprise: | | | | | | |
| Name of the responsible person in the receiving organization/ | enterprise: | | | | | |
| Mr./Mrs./Ms has a | rrived at our organization/enterprise on (day, month, | | | | | |
| year)/ and and he/she is planned to leav | re on (day, month, year) / / | | | | | |
| We certify that the traineeship is being properly carried out by the "Learning Agreement for Traineeships". | the student and in accordance with the contents of | | | | | |
| Activities carried out by the trainee, so far: | | | | | | |
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ISIA FIRENZE DESIGN

via Pisana, 79

Tel. +39 (0)55 700 301

MIUR AFAM ISIA



Ministero dell'Istruzione, Università e Ricerca Alta Formazione Artistica, Musicale e Coreutica



ISIA

Firenze

| Mid-term evaluation results: | | | | | | | | |
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| Overall evaluat | | | | | | | | |
| | ☐ 1 poor | ☐ 2 sufficient | ☐ 3 satisfactory | □ 4 good | □ 5 excellent | | | |
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| Notes: | | | | | | | | |
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| Date: | | | | | | | | |
| | | | | | | | | |
| Signature of the responsible person | | | | Receiving organization/enterprise | | | | |
| at the receiving organization/enterprise: | | | | Stamp: | | | | |

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