

ANNEX 8

TRAINING ATTENDANCE CERTIFICATE PHASE 1

The undersigned (surname and name) _____, Legal representative / Referent of the project

of the partner institution _____ located in:

State _____ City _____

code _____

address _____, n. _____

DECLARES

That _____ the _____ / _____ Mr _____ / _____ Mrs _____ (surname and name)

born in (city) _____ (____) on the (date) _____ citizen of _____,

resident in _____ (____) address _____ n. _____ cap. _____ CF _____;

has regularly attended the training course / master / specialization course

(title) _____

which was held in the

State _____ City _____

in the period from _____ to _____.

That the training course / master / specialization course included a total number of hours (teaching hours / workshops / workshops / possible internship activities) equal to hours: _____

That the hours of attendance actually carried out by the Mr / Mrs _____ justified

from internal presence registers were (indicate number of hours of attendance) _____.

Who is available to provide DiSCo - Regional Body for the Right to Education and Knowledge with the attendance records if they are required in order to carry out activity monitoring activities.

Place and date

Stamp and Signature of the declarant

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