

**TRAINEESHIP ATTENDANCE LIST** in the month:

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| Stamp of the host company: | | | | | |
| **First and last name of the Trainee:**  **Index number**: | | | | | |
| **First & last name of the Supervisor:** | | **Position** | | **Phone number** | **Workplace** |
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| **Day of the month** | **Amount of the traineeship hours:** | | **Trainee’s signature** | | **Supervisor’s signature** |
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