



**PRACTICAL-EVALUATION INTERNSHIP APPLICATION (TPV)**  
**Interministerial Decree no. 654 of 05.07.2022**

To the Magnificent Rector

The undersigned .....

Born in..... on .....

Serial number (matricola) ..... Phone number .....

Enrolled in the Study Course .....

**ASKS**

to be able to carry out the Practical Evaluation Internship, pursuant to Interministerial Decree no. 654 of 05.07.2022.

The internship will begin on .....

Name of the host organisation: .....

Service/Sector of the Institution: .....

Institution address: .....

Internship tutor: .....

Date .....

Signature