



REQUEST YOUR INTERNSHIP AGREEMENT

Here are the details you are suggested to have ready at hand to request your Internship Agreement:

- » FIRST NAME, LAST NAME, EMAIL ADDRESS and TELEPHON NUMBER of the HOST ORGANIZATION ADMINISTRATIVE REFERENT, who will follow the procedure to activate the Internship Agreement
- » FIRST NAME, LAST NAME, PLACE and DATE OF BIRTH of the LEGAL REPRESENTATIVE, who will sign the Internship Agreement, or the same details for a delegate.
- » FULL ADDRESS of the HOST ORGANIZATION'S main office