

**Attendance list**

Name/names and surname of the intern	
Employer's address stamp	
Month and year	

No.	Date	Internship hours	Signature of the intern	No.	Date	Internship hours	Signature of the intern
1				17			
2				18			
3				19			
4				20			
5				21			
6				22			
7				23			
8				24			
9				25			
10				26			
11				27			
12				28			
13				29			
14				30			
15				31			
16							

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stamp of the Employer and signature of the Intern's Supervisor