

UNIVERZA NA PRIMORSKEM  
UNIVERSITÀ DEL LITORALE / UNIVERSITY OF PRIMORSKA

FAKULTETA ZA MATEMATIKO, NARAVOSLOVJE IN INFORMACIJSKE TEHNOLOGIJE  
FACOLTÀ DI SCIENZE MATEMATICHE NATURALI E TECNOLOGIE INFORMATICHE  
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## APPLICATION FOR PRACTICAL TRAINING

### STUDENT:

Name and surname: \_\_\_\_\_

Enrolment number: \_\_\_\_\_ Year of study: \_\_\_\_\_

Study programme: \_\_\_\_\_

### INSTITUTION:

Name and address of the organization where I want to do the practical training:

\_\_\_\_\_  
\_\_\_\_\_

The organization (*circle*): **IS** / **IS NOT** on the list of organizations with which UP FAMNIT has an agreement for practical training.

Place and date: \_\_\_\_\_ Student signature: \_\_\_\_\_

### PROGRAMME COORDINATOR:

Programme coordinator (*circle*): *Biodiversity* / *Mediterranean agriculture*:

- a) **I approve** practical training in the proposed organization,  
b) **I do not approve** practical training in the proposed organization. Argumentation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Place and date: \_\_\_\_\_ Coordinator signature: \_\_\_\_\_