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**CERTIFICATE OF ATTENDANCE**

**School of Agriculture and Veterinary Medicine**

The company tutor..... declares that the  
trainee.....registration N.  
(matricola).....attending the degree course in  
..... has completed the compulsory traineeship at  
.....  
from ..... to ....., total duration of..... hours and.....  
months, total of..... CFU, by doing the following activities:

.....  
.....  
.....

Date,

Signature of the company tutor

.....

**AMMINISTRAZIONE CENTRALE** ◆ **UNIVERSITÀ DEGLI STUDI DI PADOVA**  
AREA XXXXXX XXXXXXX XXXX  
UFFICIO XXXXXXXXXXXXXXXXXXXXXXX