**CERTIFICATE OF ATTENDANCE - WORK PLACEMENT 2024/25**

**(To be completed by supervisor at Host Organisation at END of placement)**

This is to confirm that Swansea University student: ...................................................................................

 *(Full name of student)*

Swansea University student number: .........................................................................................................

has completed a work placement at ..........................................................................................................

 *(Name of Host Organisation)*

in: ................................................................................., ………....................................................................

 *(city) (country)*

from: ............................................................……….. to .....................................................................

*(Start date: dd/mm/yyyy) (End date: dd/mm/yyyy)*

***IMPORTANT****: This form CANNOT be signed and dated before the last date of attendance*

*Typed signatures are not accepted*

|  |  |
| --- | --- |
| **Name and position of host organisation signatory:** | **Student Name:** |
| **Signature:** | **Student signature:** |
| **Date:** | **Date:** |
| **Official stamp:** |  |

Please complete and return this form to **studyabroad@swansea.ac.uk**

**Typed signatures are not accepted**