

UNIWERSYTET JANA KOCHANOWSKIEGO W KIELCACH COLLEGIUM MEDICUM

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Appendix to the Institute's Regulations on summer internship at the medical faculty at Collegium Medicum of Jan Kochanowski University in Kielce

Students who, due to the epidemiological situation, did not have the possibility to complete summer internships by the end of the 2019/2020 academic year, can complete them during the 2020/2021 academic year.

The internship dates include:

- 1. Monday to Friday, time free from didactic classes,
- 2. Saturday and Sunday in full time

Confirmation of the completion of the summer internship should be submitted to the Institute of Medical Sciences after completing the entire internship.

Instructions for completing summer internships in the 2020/21 academic year included in the study program in the 2019/20 academic year:

- 1) Selection of the institution with which the university has signed an agreement on conducting internships and practical classes in 2020/21 academic year in agreement with the relevant internship supervisor.
- 2) Establishing a Schedule for the internship in accordance with the Attachment 1 to this document (attached document) after consulting the relevant internship supervisor and the head of the unit where the internship is planned.
- 3) After completing the entire internship, in the winter and / or summer session, the internship supervisor should be provided with:
- a) Printout of the schedule of classes from the Virtual University covering the period of the overdue internship, if it was not conducted during the days off from classes.
- b) The schedule of the internship included in the study program in the year 2019/20 with the signature and seal of the head of the unit in which the student completed the internship.



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Attachment 1 to the Appendix to the Institute's Regulations on summer internship at the medical faculty at Collegium Medicum of Jan Kochanowski University in Kielce

SCHEDULE

for the summer internship included in the 2019/20 academic year study program			
Student's 1	name and surname		ID number
Faculty: Medicine Form of study: full-time			
Academic year: 2020/21 Year of study: Semester:			
Refers to:			
Su	mmer internship included in the 2	019/20 academic year s	study program
Year of stud	ly:		
Internship Name of the internship		Number of hours according to the study program:	Number of hours to complete:
Date	Name of the institution	Number of didactic hours	Notes
Total			
 Date of c	completion Signature and stamp of the	institution's Sta	amp of the institution