

APPENDIX III

REQUEST FOR PRELIMINARY AUTHORISATION TO UNDERTAKE EXTERNAL ACADEMIC INTERNSHIP IN AN ORGANISATIONAL UNIT OF THE UPV/EHU (University of the Basque Country)

Ms/Mr .………………………………………………………………………………… Head of the Organisational Unit ……………………………………………………………….., I guarantee that this Unit complies with the requirements established in article 21 of the UPV/EHU’s Regulations on External Internships and I request authorisation for the following Educational Cooperation Programme:

|  |  |
| --- | --- |
| Denomination of the Internship to be developed |  |
| Total no. hours of internship |  |
| Place where activity will be developed |  |
| Student instructor |  |
| Student |  |
| Degree/Diploma |  |
| Enrolment centre |  |

Student aid:

|  |  |
| --- | --- |
| Total amount of Student aid (of NO amount is provided, indicate “No content” in the amount) | Amount: ……………………………………..Euros |
| Budget designation: |
| ORGANIC |  |
| FUNCTIONAL |  |
| ECONOMIC |  |
| This amount will be paid at the end of the activity, or in two instalments for internships longer than 6 months. |

As Head of the Organisational Unit, I guarantee that the credit to cover the amount of this Grant and the corresponding Social Security contribution is available in the budget designation indicated and that can be used for this purpose. Likewise, I am responsible for the steps taken to guarantee payment of the Grant and compliance with the tax obligations and Social Security contributions established by current legislation.

In ………………………………, on ………. of …………………………..., ……………….

|  |  |
| --- | --- |
| Head of the Organisational UnitSignature | Approval of instructorSignature |

Ms/Mr………………………………………………………Dean, Director, Vice-rector of ……………………………………………………….AUTHORISE the Organisational Unit ....................................................................to carry out the Educational Cooperation Programme described in this application.

In ………………………………, on ………. of …………………………..., ……………….

(Signature and stamp)