Pieczęć pracodawcy Data: **O P I N I A**

Imię i Nazwisko, adres zamieszkania:............................................................................

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Miejsce stażu: ...............................................................................................................

Okres:.............................................................................................................................

Stanowisko:....................................................................................................................

**Zadania wykonywane w trakcie stażu** :

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**Nabyte umiejętności i kwalifikacje:**

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Pieczęć i podpis pracodawcy