

CERTIFICATE
OF 2-WEEK OBLIGATORY INTERNSHIP
IN TRAUMATOLOGY
AS PART OF THE STUDENT'S SIXTH YEAR CURRICULUM

Name: _____ Neptun code: _____

Date and place of birth: _____

The above mentioned medical student of Semmelweis University has completed a 2 week internship at _____ in the University Traumatology Department* / University Orthopedic-Traumatology Department* / Municipal Hospital Traumatology Department* / Municipal Hospital Orthopedic-Traumatology Department*.
The work hours of the practice are 30 hours/week (6 hour/day).

Duration of practice: from _____ – until _____

Amount of hours spent at practice: _____
(30 hours/1 week)

Evaluation: excellent* satisfactory* unsatisfactory*

Date, city, country

Stamp of Traumatology Department

Printed name of the Head of the Department
of Traumatology

Signature and stamp of the Head of the
Department of Traumatology

* Please underline one of the following