

## Traineeship Confirmation

Mr/Mrs \_\_\_\_\_,  
born on \_\_\_\_\_ in \_\_\_\_\_,  
residing at \_\_\_\_\_;

hereinafter referred to as the "**Trainee**".

1. Trainee hereby confirms that he / she will attend the traineeship \_\_\_\_\_ that he / she has applied for and has been selected for.
2. The trainee is liable for any costs or damages that occur because he/she will not sign this Traineeship Agreement on time or will not attend the traineeship after signing the agreement or in any other way confirming the participation in the respective traineeship.
3. The duration of this contract will be from \_\_\_\_\_ to \_\_\_\_\_. The applicable working time and remuneration will be as defined in the respective Traineeship Specification Form, unless otherwise determined in the Local Addendum to this contract provided by the Traineeship Provider.
4. During the performance of the present contract, the Trainee will be covered by all insurance policies applicable to the employees of the Traineeship Provider, to the extent permissible under the applicable national laws. Should such insurance coverage not be applicable for the trainee, the latter has a responsibility of acquiring his / hers own insurance coverage.
5. Trainee confirms to be aware that any breach of this agreement or cancellation after signing this agreement can lead to violation of Articles 1 and 9 of the general terms of participation as agreed to in the application form.

\*read and approved\*

The Trainee

Place and Date

\_\_\_\_\_

\_\_\_\_\_