



## (Annex V) Reports extracurricular practices

Agreement code:

No. Hours

Company:

Tutor/a:

Student:

Collaborating institution where the student has carried out the practices.

Detailed description of the tasks and work that he/she has carried out

Assessment of the tasks performed with the knowledge and skills acquired in he/her university studies

Overall assessment of extracurricular practices (this section must be filled in by the tutor of the extracurricular practices)

Signature of the Company Tutor:

Date:

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**Annex V (continued)**

**(To be filled in by the center)**

Academic Tutor confirmation

Favorable

Unfavorable

Signature academic tutor and date: