HOST INFORMATION FACT SHEET

(to be attached to Convention Agreement Form)

Name _____

Legal Representative

Surname _____ Name _____

Place and Date of Birth _____

Registered Headquarters

Address Street n°_____ Street _____

Postcode _____ Town _____ Province _____

Telephone _____ Fax_____

Website _____

E-mail _____@_____

E-mail PEC _____@_____

Operating Headquarters

Address Street n°_____ Street _____

Postcode _____ Town _____ Province _____

Telephone _____ Fax_____

Correspondence address

Address Street n°_____ Street _____

Postcode _____ Town _____ Province _____

Telephone _____ Fax_____

Sector _____

Sector description _____

VAT |__|__|__|__|__|__|__|__|__|__|__| **TAX CODE** |__|__|__|__|__|__|__|__|__|__|__|

Professional association and / or territorial membership _____

Trade union representatives of corporation ❒ None ❒ Other _____

Number of permanent staff ❒ not more than **5** ❒ **6** to **19** ❒ **20** or more

Corporate Referent

Name _____

Professional Role _____

Telephone _____ Fax_____

E-mail _____@_____

University/Academic Referent

Prof. _____

Telephone _____ E-mail _____@unicampania.it

It is hereby declared that the agreement complies with the regulations. The Promoter is hereby authorized, establishing implementing regulations for the handling of personal data, to process data above for purposes related to the traineeship agreement to which this fact sheet is attached and, in any case, in context with institutional activities.

Signature and Official Stamp for Host