



JOB DESCRIPTION FORM

COMPANY

Company ID Number (to be inserted by LEOSAXONY):			
Name of enterprise:		Division of placement:	

PLACEMENT OFFER RELATED DATA

CONTACT PERSON / SUPERVISOR OF PLACEMENT

First name:		Last name:	
Title:		Gender:	
Telephone:		E-Mail:	

TYPE OF OFFER / DEMAND

Offer Type:		Permanent demand	
Total Demand		Classification:	

TIMEFRAME

First day of placement <i>(dd.mm.yyyy)</i>		Last day of placement <i>(dd.mm.yyyy)</i>	
Duration in weeks <i>(Minimum: 3 months = 12 weeks)</i>			



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This form should be filled out by the employer after the internship tasks have been defined and discussed with the trainee. Please keep in mind, that the information given here is an essential part of the ASiiA Training Agreement. We, therefore, kindly ask you to provide accurate and complete information.

Please give a short description of the company/ organization and the department where the placement is to be completed:

Please give a detailed job description of the planned internship and list the tasks of the trainee as well as knowledge, skills and competences required for the internship:

Please describe the monitoring and mentoring during the internship:



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WORK SCHEDULE

ASiiA program participants must complete as per ASiiA regulation a full-time internship. Please indicate below regular working hours of a full-time employee in your company as well as the workload expected of the trainee.

How many hours (per week) will the trainee work in your company?	
What are the regular work hours of your company?	

SKILL AND LANGUAGE REQUIREMENTS

REQUIRED FIELDS OF STUDY FOR THE INTERNSHIP

REQUIRED COMPUTER SKILLS

REQUIRED LANGUAGE SKILLS

Team language(s):	
Other desired language(s):	