

Subject: Confirmation statement on guidance of Professional Practice activities in the context of the IMBRSea study programme

To whom it may concern,

Hereby,

I, [first name] [Last name], employed at [Institute name], confirm that I will be able to supervise student [first name] [Last name] during the activities planned for the professional practice.

I do confirm that:

* [1] all professional practice activities can be carried out respecting safety regulations as issued by the local authorities,
* [2] all professional practice activities will be finished within the timeframe set by the IMBRSea programme (latest start date May 4th 2020, submission of final reports by June 25th 2020).
* [3] in case the activities are carried out remotely, regular (at least weekly) contacts with the students will take place and that the student will receive sufficient guidance.
* [4] I have read and understood the requirements of an IMBRSea Professional practice as written down in the guidelines available through the IMBRSea website.

Date:

Signature: