**Practicum Certificate**

We hereby confirm that

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| --- |
|       |
| (name and surname) |
| born at |       |
|  | (date and place) |
| student of |       | year branch/spec. |       |
|  | at Faculty of Civil Engineering CTU in Prague |
| has completed in our firm/institution |
|       |
| (company name and address) |
|       |
| (department, division, branch office) |
| a practicum oriented to the branch of study from |       | to |       |
|  |
| Main activities performed within the practicum: |
|       |
|       |
|       |

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| --- | --- | --- | --- |
| In |       | on |       |

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| --- |
|  |
|       |
| name of authorized staff |
|  |
|  |
| signature of authorized staff or stamp |