**Letter of Acceptance**

**Undersigned I agree that ………………………………… (Student’s name, neptun code), student of Faculty of Public Governance and International Studies of University of Public Service, in …………………………………. bachelor/master programme\* in 20…/20… academic year completes the professional practical training of public administration at our organisation…….……………………..….. (hereinafter: Host Institution) between …………….. (day, month, year) – (day, month, year)**.

**Host Institution:**

Name:

Adress:

Type of Istitution: \*\*

Host Institution’s relevant public admisnitration activity related to professional practical training:

Description of intended professional activity:

**Person responsible for professional training in Host Institution:**

Name:

Position:

Work Address:

Telephone,fax:

E-mail:

**Supervisor:**

Name:

Position:

Work Address:

Telephone,fax:

E-mail:

Dated: Budapest, ……day………month………year

…………………………………………………

**(Signature and Seal of Host Institution’s representative)**

\*Underline the appropriate

\*\*eg. economic organisation, budgetary authority

Professional Practical Training at this Host Institution is:

**Accepted Not accepted**

Dated: Budapest, ……day………month………year

**Dr. Méhes Tamás**

**Vice Dean for Education**