



Academy of Tourism and Hotel Management

Bachelor degree

Year of study: Semester:

Field: **TOURISM AND RECREATION**

Speciality :

INTERNSHIP BOOK

.....
Name and surname of student

.....
Album number

.....
Internship date

Place of internship

.....

.....

.....

Name of tourism operator

.....
Signature of internship coordinator



I Week

.....
Name of tourism operator

Name and surname of student:.....

WEEK CARD

Week from r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



II Week

.....
Name of tourism operator

Name and surname of student:.....

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



III Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



IV Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



V Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



VI Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



VII Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



VIII Week

.....
Name of tourism operator

Name and surname of student:.....

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



IX Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



X Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



XI Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



XII Week

.....
Name of tourism operator

Name and surname of student:

WEEK CARD

Week from..... r. until r.			
Day	Hours of work from - until	Number of working hours	Specification of activities

Confirmation from the workplace that classes have been held:

.....
Stamp and signature of internship Supervisor



Opinion of the Tourism Operator about the internship completed by the Student

(diligence, responsibility, creativity, own initiative, carrying out tasks in a way that ensures own safety and that of the surroundings, respect for health and safety rules, ability to supplement and improve knowledge, correct identification of professional dilemmas in the field of practice, etc.)

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LEARNING EFFECTS achieved by the WSTiH first degree student during the internship:

LEARNING OUTCOMES FOR THE SUBJECT			
Code	Effects in terms of:	Completed	Not completed
Knowledge – Student knows and understands:			
W1	The student has knowledge of various organisational solutions used in the tourism and leisure industry		
W2	Becomes familiar with the principles and specifications of the various parties and markets in the area of tourism and recreation		
Skills – Student is able to:			
U1	Has the ability to identify the needs of different customer groups regarding tourism and leisure activities		
U2	Can communicate with the customer and justify his/her position using industry-specific terminology		
U3	Independently plans and organises his/her own work and work of the team		
U4	Applies the acquired knowledge and skills in the field of tourism and recreation to practical activities.		
Social competences - The student is ready to:			
K1	Understands the importance of knowledge in solving practical problems in the tourism and leisure industry.		



K2	Fulfils social obligations, works in a team in an entrepreneurial manner		
K3	The student applies the principles of professional ethics in the field of tourism and recreation.		

.....
Stamp and signature of internship Supervisor

Passing the internship:

Date of passing the internship:

I acknowledge points of ECTS.

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Stamp and signature of internship Coordinator