

FORM FOR PROFESSIONAL TRAINING POSITION - INTERNSHIP ATTENDANCE & TASKS

for PRAKTIJKLEREN subsidy MBO BBL, vmbo or PRO

Name of student:							
Internship or practical training for:		<input type="checkbox"/>	BBL	<input type="checkbox"/>	PRO	<input type="checkbox"/>	vmbo
MBO BBL course name:						course code (crebo):	
Training company name:							
Name of practical supervisor / mentor of training company:							
School year / Academic year:							

Week	bpv tasks/activities	Number of hours worked without illness and leave*	Week	bpv tasks/activities	Number of hours worked without illness and leave*
31			6		
32			7		
33			8		
34			9		
35			10		
36			11		
37			12		
38			13		
39			14		
40			15		
41			16		
42			17		
43			18		
44			19		
45			20		
46			21		
47			22		
48			23		
49			24		
50			25		
51			26		
52			27		
1			28		
2			29		
3			30		
4			31		
5					

*When calculating the number of hours worked, note the number of hours the student was present: do not include illness and leave!

Did the student stop or graduate early during the school year 2025/2026? After this you will no longer be eligible for subsidy. Enter this date next to it.	Date

Agreement of practical supervisor/instructor		Student/pupil agreement	
Name		Name	
Signature		Signature	
Date of signing		Date of signing	