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| **Tytuł projektu** (Title of Project) | | | **Wysokiej jakości program stażowy fundamentem dla Studentów kierunku Transport na WMRiT Politechniki Poznańskiej** | | | | |
| **Akronim i numer projektu** ERP (Acronym and ERP Project number) | | |  | | | | |
| **Imię i nazwisko stażysty lub opiekuna stażu\*** (Person Name, position) | | |  | | | | |
| **Kierownik/koordynator projektu** (Person in charge of the Project) | | | **dr inż. Marcin Kiciński** | | | | |
| **Miesiąc i rok** (Month and Year) | | |  | | | | |
| Działania |  | Godziny | |  | Godziny | | Suma godzin |
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| Łącznie |  |  |  |  |  |  |  |
| (\*) – niepotrzebne skreślić | | |  |  |  |  |  |
|  |  |  |  |  | Podpis stażysty / opiekuna stażu\* | |  |
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|  |  | Potwierdzam prawidłowe wykonanie zadań | |  | Zatwierdzam prawidłowe wykonanie zadań | |  |
|  |  |  | |  | *Dr inż. Marcin Kiciński* | |  |
| data |  | Podpis osoby odpowiedzialnej merytorycznie | |  | Podpis kierownika Projektu | |  |