

# WORK PLACEMENT CERTIFICATE

## Assistant Animal Keeper

The work placement certificate is to be completed together with the trainee and signed by the employer.

The work placement certificate is to be issued at **the end of the placement period prior to a school period** to the trainee, and the educational institution receives a copy.

In case the work placement certificate is issued for the trainee's **final placement period**, The Trade Committee for Agricultural Education should also receive a copy of the certificate.

### To be completed by the employer:

Name of trainee: \_\_\_\_\_ CPR number \_\_\_\_\_

Address: \_\_\_\_\_

Postcode and city: \_\_\_\_\_

Full time work placement period: *(must be completed)*

from: \_\_\_\_\_ to: \_\_\_\_\_ total: \_\_\_\_\_ months

Name of employer: \_\_\_\_\_ CVR number: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode and city: \_\_\_\_\_

**Stage 1 (2 years)**

**Stage 2 (1 year and 5-11 months)**

### Placement objectives

The placement objectives depend on the stage the trainee has reached in his/her education. Please indicate to what extent the objectives have been achieved during the placement period.

PLACEMENT OBJECTIVES	Has the trainee performed tasks related to this objective?		If yes, has the objective been achieved?			Is further training or experience required?	
	Yes	No	Yes	Partly	No	Yes	No
<b>STAGE 1</b>	<b>Animal care, handling and feeding</b>						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Personal skills</b>						
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Description of any further training or experience required:

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Date

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Company signature/stamp