**УТВЕРЖДАЮ**

Проректор по международным

и внешним связям

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Т. Н. Полутина

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_

**ОТЧЕТ**

**об участии в «Программе международной академической мобильности КубГАУ» за 201\_\_ год**

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 *(Фамилия Имя Отчество, должность)*

Тема стажировки \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Руководитель стажировки \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Направление поездки: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *страна Вуз, организация*

Содержание (цель): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Краткое содержание программы пребывания: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Состав делегации (Ф.И.О., должность): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Сроки мобильности: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Список контактных лиц принимающей стороны (Ф.И.О., должность):

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Отчет о выполнении задач (или приложение на \_\_\_ листах):

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Отчет о результативности участия в программе (перспективы):

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Сумма израсходованных средств по программе:

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| Приложение:  | фотоматериалы; |
|  | буклеты; |
|  | контакты, презентационные материалы |

Представление отчета на заседании кафедры/совете факультета

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| *(Фамилия Имя Отчество стажера)* |  | *(подпись)* |
|  |  |  |
| СОГЛАСОВАНО |  |  |
|  |  |  |
| Декан факультета |  |  |
|  |  | *(подпись)* |
|  |  |  |
| Начальник отдела международных связей |  |  |
|  |  | *(подпись)* |
|  |  |  |
| Помощник декана  |  |  |
| по международной работе  |  |  |
|  |  | *(подпись)* |