

# MBEYA UNIVERSITY OF SCIENCE AND TECHNOLOGY

**ARRIVAL NOTE:** (Please fill it and scan it to SIMS not more than two weeks after starting your PT)

TEACHING PRACTICE FROM (Dates) 8/07/2024 TO 13/9/2024

NAME OF STUDENT: CHRISTINA MALEKELA

REGISTRATION NO. 21100823020107

DEPARTMENT: FOOD SCIENCE AND TECHNOLOGY LEVEL: UOJG (THIRD YEAR)

I declare that I have started working with (Name of School/ College) MBEYA MILK COMPANY LIMITED on (date) 8/07/2024 under the Supervision

of (Name of Head of School/ Principal) from EVELINE J. KADODO Who is (Position of Head of School / Principal) QUALITY CONTROL OFFICER (Address of School/College) S.I.P 1354

Tel No: Mobile: 0748 32 02 39

E-mail: Everengaphet@gmail.com

Give a short description of location of School /College and your working place:

LOWETO BLOCK T MBEYA

Date: 08/07/2024 Student's signature

Student's contact address: 076 4819362

Mobile number 0764819362

Email address:

Place: MBEYA

Training Officer's signature and official stamp:

