**PRACTICUM TRAINING AGREEMENT**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_ years of age, Filipino, single/married with residence and postal address at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ bonafide student of City College of Angeles, Angeles City.

In compliance with the curriculum requirement of my course in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

I have to complete ***500 hours*** of IT Training at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

located in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

The said establishment has granted me the privilege to undergo actual office practice and agree with the following terms and conditions:

1. I will be responsible for my acts during my training.
2. That the City College of Angeles and the abovementioned establishment will not be held liable for any injury/illness/damages as a result of my negligence that may occur during my Practicum Training period.
3. I will observe the rules of etiquette at all times. I will follow the rules and regulations pertinent to practicum training as discussed by the practicum coordinator during orientation.
4. I am aware that any violation of the rules and regulation and any form of misdemeanor may result to disciplinary action depending upon the gravity of the said misdemeanor.

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|  | Signature of Student  Over Printed Name |  | Date |  |

**CONFORME**

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|  |  |  |  |  |
|  | Signature of Parent / Guardian  Over Printed Name |  | Signature of School Practicum Coordinator Over Printed Name |  |

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|  |  | Signature of Company Representative  Over Printed Name |  |  |