**ACCEPTANCE LETTER**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date)

TO: The Practicum Coordinator

College of Computer Studies

Bestlink College of the Philippines

This confirms the acceptance of Mr. /Ms. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**as trainee. As such, he/she will be given work exposure in the areas indicated in the enclosed job description.

This also confirms that the College of Computer Studies, Bestlink College of the Philippines, reserves the right to discontinue internship of the above if the work exposure does not meet the requirements set by the College.

This will also confirms that our company reserves the right to discontinue the training of the above, should the student fail to meet the standards mutually agreed on by the College of Computer Studies and our company.

Further, our company agrees to set the internal company work schedule and objectives followed by the student trainee, such work schedule to be supervised by a duly assigned officer of the company.

Lastly, the company agrees to mutually consult with assigned practicum coordinator of the College of Computer Studies to discuss the trainee’s work progress.

SIGNATURE OF ACCEPTING OFFICER : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINTED NAME OF ACCEPTING OFFICER : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

JOB TITLE OF ACCEPTING OFFICER : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF COMPANY : BESTLINK COLLEGE OF THE PHILIPPINES

OFFICE ADDRESS : 1071 BRGY. KALIGAYAHAN QUIRINO H-WAY Q.C

TELEPHONE NUMBER/S : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADRESS : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please send this form along with the practicumer’s job description form immediately upon acceptance of the student.