**Acceptance statement**

**TO FULFILL THE REQUIREMENTS OF THE COURSE**

**„SPECIAL EDUCATION PRACTICE 4.”**

Study Track: The Education of individuals with intellectual disabilities S-GYPE 153

Study Track: The education of slow learners and of individuals with mild intellectual disabilities S- GYPT 173

\*Underline the appropriate study track!

Hereby I confirm that I accept ………………………………………………(*name of student*),

who is a the full-time student at the Institue of Special Education of the University of Szeged, Hungary as an unpaid intern into my organisation, ……………………………………………….……………………………..

(*name of organization or institution*),

in its ……………………………………………… division.

The student can fulfill the requirements of the course **„Special Education practice 4.”** in our institution

from ……………(*day*). ……… (*month*), 201\_\_\_.

to …………….(*day*) ……… (*month*) 201\_\_\_.

I also acknowledge and accept that the Institute of Special Education at the University of Szeged, Hungary will not pay any fees or wages to the supervisors working with the students.

Date: ...........................(day) ……………………….. (month) 201\_\_.

(stamp of institute)

 ………………………………….

 Signature

Signed by: ……………………………..

His/Her position: ……………………………………...