



# UNIVERSITY OF MAURITIUS FACULTY OF SCIENCE

## STUDENT WORK EXPERIENCE PROGRAMME (SWEP) 2009

### STUDENT AGREEMENT FORM

Surname of student (in capital letters): \_\_\_\_\_

First name of student (in capital letters): \_\_\_\_\_ Gender: M  F

Address (in capital letters): \_\_\_\_\_

Tel (Residence): \_\_\_\_\_ Email: \_\_\_\_\_

Faculty: \_\_\_\_\_

Programme: \_\_\_\_\_ Year of study: \_\_\_\_\_

### Commitment by Student Trainee

I undertake to:

1. participate in any pre-placement orientation session organised by the University in the context of the *SWEP*;
2. be present and be punctual on all working days at the placement organisation during the duration of the attachment;
3. abide by the internal regulations of the placement organisation;
4. maintain the confidentiality of any sensitive information to which I may become aware concerning the organisation;
5. inform my Faculty *SWEP* Coordinator at the University as soon as possible in case of any major problem faced that would adversely affect the proper progress of the placement.

Signature of student: \_\_\_\_\_ Date: \_\_\_\_\_

*(For office use)*

Name of Organisation: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person (in capital letters): \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Dean, Faculty of Science

Signature: \_\_\_\_\_ Date: \_\_\_\_\_