

**SAHL Training Form**

* **Student Information**

|  |  |  |
| --- | --- | --- |
| 1.  | Student name  |  |
| 2.  | Student ID | **:**  |
| 3.  | Field of study  | **:**   |
| 4.  |  Academic year **:**  | **:**  |
| 5.  | Semester **:**  | **r** |

* **Training Company (To be filled by the company):**



|  |  |  |
| --- | --- | --- |
|   | Name of the company  | :  |
|   | Training period :  | From…………….……..To……  |
|   | Number of training days  | :  |
|   | Number of training hours  | :  |
|   | Field of training  | :  |
|   | …………………………………………………….………………………….……………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………..………………………………………  |
|   | Commitment of student for training program, instructions, regulations and training time**:-**       |
|   | Behaviors of the student with the trainer and other workers:-        |

**Approved by/ Name & Stamp of the Name & Signature of Dean Assistant for Industrial Links** **Training Company Training Supervisor**

**Building B, Office 011
t: +962 6 429 4664**

**f: +962 6 430 0215**

**e-mail: raghad.hadidi@gju.edu.jo
School of Applied Humanities and Languages (SAHL)**

http://www.gju.edu.jo/content/school-applied-humanities-and-languages-383

**Website http://www.gju.edu.jo**