

DATA SHEET
For Extramural Food Hygiene Training - Semester 11

Student's name:

I (the undersigned), practice supervisor certify

that the student has completed the task at the indicated time during my supervision.

	<i>Task</i>	Place of training	Period/Time of training
1	Meat inspection at slaughterhouse		
	1.1. Swine and/or cattle		
	1.2. Any other slaughter animal		
2	Food safety control of a site of primary production (farm)		
3	Registration and approval of a food processing establishment and the official control of it		
4	Official control of the transport and wholesale storage of foodstuffs		
5	Official control of the retail marketing of foodstuffs		
6	Official control of catering establishments		
7	Official control of small-scale food production, processing, and marketing		

1. The fulfilment of point 1 is obligatory according to the following schedule. The respective training period is at least one week, out of which minimum 3 days must be accomplished in a pig and/or cattle slaughterhouse.
2. Tasks indicated under points 2-7 are selectable, but it is compulsory to cover at least 70% of those tasks (means minimum of 4 tasks).

Date:

.....
 Supervisor's signature

Certificate

I (name of supervisor) hereby certify that(name), 11th semester student of veterinary medicine has completed his/her

- farm animal medicine
- equine medicine
- small animal medicine
- laboratory diagnostics
- food hygiene / state veterinary medicine practice*

at.....
.....
..... (name and address of institution)
from202... to202... (date) fulfilling at least the 70% of the requirement list.

Suggested practical grade:

Personal comments (optional):

.....
.....
.....
.....

Date: supervisor's signature

* *please underline*