Project Stage 2024

> Final Report

> Stagiaire Personal Data

* Name
* Last name
* Email
* Phone number

> Host Firm Data

* Firm Name
* Headquarters

(Address/City/Country)

* Tutor Lawyer

(First and Last Name/Role within the Host Firm/email address)

> Legal issues addressed during the Stage

|  |  |
| --- | --- |
| **Date** | **Matter** |
| \*\*.\*\*:\*\*\* |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

> Attendance at hearings

|  |  |
| --- | --- |
| **Date** | **Matter** |
| \*\*.\*\*:\*\*\* |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

> Other educational activities

|  |  |
| --- | --- |
| **Date** | **Matter** |
| \*\*.\*\*:\*\*\* |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

> Overall evaluation of the internship period and final comments.

\*\*\*

I request the recognition of CLE credits, as provided for by the so-called "self-training," pursuant to Art. 13, c. 1 lett. f), of the Regulations on legal education of the CNF ("*study seminar activities, including within one's own professional organization and through the use of telematic systems, previously authorized or accredited by the CNF or the COA according to their respective competencies*").

Date and Place

Sincerely,

First and Last Name

Signature

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

**>For confirmation**

First and Last Name

(Tutor Lawyer)

Signature

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

All communications should be sent to the Stage Committee, to the e-mail address [crint.stage@ordineavvocatimilano.it](mailto:crint.stage@ordineavvocatimilano.it)