## BTS – Stage de fin d’études – Fiche de stage

**Stage du 12.02.2024 au 14.06.2024**

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|  | **Entreprise** *(Adresse de correspondance)* | | | | | | | | | | | | | | | | | | | | |  | |
|  | Dénomination de l’entreprise / Raison sociale | | | | | | | | | | | | | | | | | | | | |  | |
|  | Dénomination de l’entreprise / Raison sociale | | | | | | | | | | | | | | | | | | | | |  | |
|  |  | | | | | | | | | | | | | |  | | | | | | |  | |
|  | Téléphone | | | | | | | | | | | | | |  | E-mail | | | | | |  | |
|  | Téléphone | | | | | | | | | | | | | |  | E-mail | | | | | |  | |
|  | Numéro | |  | | rue | | | | | | | | | |  | Code postal | | |  | Localité | |  | |
|  | Numéro | | |  | rue | | | | | | | | | |  | Code postal | | |  | | Localité |  |
|  | BP | | | | | |  | | | | | | |  |  |  | | | | | | | |
|  | Boîte postale | | | | | |  | | | | | | |  |  |
|  |  | | | | | |  | | | | | | |  |  |  | | |  |  | |  | |
|  | **Patron de stage désigné par l’entreprise** | | | | | | | | | | | | | | | | | | | | |  | |
|  |  | Madame | | | |  | | Monsieur | | | | | | | | | Prénom et NOM | | | | |  | |
|  |  | |  | | | |  | |  | | | | | | | Prénom et NOM | | | | | |  | |
|  | Département | | | | | | | | | | |  | | |  | Fonction | | | | | |  | |
|  | Département | | | | | | | | | | | | | |  | Fonction | | | | | |  | |
|  | E-mail | | | | | | | | |  | | | | | | | |  | | | |  | |
|  | E-mail | | | | | | | | | | | | | | | | |  | | | |  | |
|  | Téléphone | | | | | | | | | |  | | | |  | Téléphone portable | | | | | |  | |
|  | Téléphone | | | | | | | | | | | | | |  | Téléphone portable | | | | | |  | |
|  | rue | | | | | | | | | | |  | Numéro | |  | Code postal | | |  | | Localité |  |
|  | rue | | | | | | | | | | | Numéro | | |  | Code postal | | |  | | Localité |  |
|  |  | | | | | | | | | | |  | |  |  |  | | |  | |  |  |

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|  | **Étudiant(e) stagiaire** |  |  | | |
|  | Prénom et Nom | Prénom et NOM |  | | |
|  | Matricule : | Numéro matricule luxembourgeois |  | | |
|  | Adresse domicile : | Numéro / rue / code postal / localité |  | | |
|  | Téléphone : | Téléphone |  | | |
|  | Téléphone : | Téléphone portable |  | | |
|  | Section : | Section BTS, p.ex. Assistant de direction | Classe : | Classe |  |
|  |  | |  | | |

|  |  |  |
| --- | --- | --- |
| Date |  |  |
| Date |  | Signature du représentant de l’entreprise |
|  |  | Prénom et NOM |
|  |  | Prénom et NOM du signataire |