

## Interim I.A.E. traineeship evaluation report.

Company:			
Name of trainee:		IAE number:	
Name of traineeship supervisor:		IAE number:	
Complete traineeship period from:	to:	· · · · · · · · · · · · · · · · · · ·	
Interim traineeship period from:	to:		

## Criteria for the traineeship report :

1- Business volume by mandate (number of cases by category)

Evaluation	Legal Protection	Arbitration	Judiciary	Technical
Reconstruction	Accidentology	Administration	Control	Other

- 2- Description of activities and or trainings followed + evaluation.
- 3- Synthesis of strong and weak points to be worked on
- 4- Conclusions on the analysis of the reference period + envisioned remediation commitment.

Signature of the Trainee

Signature of the Traineeship Supervisor

Comments by the Traineeship Supervisor (optional):

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