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| *(pieczęć instytucji)* | | |  | | *(miejscowość)* | | | *(data)* | | | | | | |  | |
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| **Wydział:** |  | Wydział Nauk Biologicznych | | | | | | | | | | | |  | | | |
|  |  | *(pełna nazwa wydziału)* | | | | | | | | | | | |  | | | |
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| **Kierunek:** |  | Żywienie człowieka i dietoterapia | | | | | | | | | | | |  | | | |
|  |  | *(pełna nazwa kierunku)* | | | | | | | | | | | |  | | | |
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| **Specjalność:** | | - | | | | | | | | | | | |  | | | |
|  |  | *(pełna nazwa specjalności)* | | | | | | | | | | | |  | | | |
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| **Studia:** |  | stacjonarne/niestacjonarne\* | | | | | | | | | | | |  | | | |
|  |  | pierwszego stopnia/~~drugiego stopnia/jednolite magisterskie~~\* | | | | | | | | | | | |  | | | |
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| **Semestr studiów:** | | Drugi | | | | | | | | | | | |  | | | |
|  |  | *(nr semestru)* | | | | | | | | | | | |  | | | |
| **Rok akademicki:** | |  | | | | | | | | | | | |  | | | |
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| **OPINIA Z PRZEBIEGU PRAKTYKI ZAWODOWEJ I WRAZ Z OCENĄ** | | | | | | | | | | | | | | | | | |
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| **Nazwa instytucji:** | |  | | | | | | | | | | | |  | | | |
|  |  | *(pełna nazwa instytucji)* | | | | | | | | | | | |  | | | |
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| **Adres instytucji:** | |  | | | | | | | | | | | |  | | | |
|  |  | *(ulica)* | | | | | | | | | | | |  | | | |
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|  |  | *(kod pocztowy)* | | | |  | *(miejscowość)* | | | | | | |  | | | |
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| **Opiekun praktyk w instytucji:** | |  | |  | | | | | | | | | |  | | | |
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| **Stwierdza, że student/studentka \*:** | | | |  | | | | | | | | | |  | | | |
|  |  |  | | *(imię i nazwisko studenta)* | | | | | | | | | |  | | | |
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| odbył/odbyła\* w okresie od | |  | | | | do |  | | | | |  | |  | | | |
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| praktykę w tutejszej instytucji w wymiarze: | | | | 6 | | | tygodni tj. | | 180 | | | godzin. | |  | | | |
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| **Potwierdzenie uzyskanych efektów uczenia się osiągniętych przez studenta odbywającego praktykę** | | | | | | | | | | | | | |  | | | |
| **STUDENT:** | | | | | | | | | | **Tak lub NIE** | | | |  | | | |
| wykorzystywał w praktyce wiedzę o normach i zasadach racjonalnego żywienia | | | | | | | | | |  | | | |  | | | |
| skonstruował i wdrożył plan żywienia zbiorowego pod opieką specjalisty, uwzględniając warunki ekonomiczne | | | | | | | | | |  | | | |  | | | |
| zaprojektował i stosował odpowiednie techniki przygotowywania potraw | | | | | | | | | |  | | | |  | | | |
| stosował odpowiednie technologie i urządzenia w procesie produkcji potraw | | | | | | | | | |  | | | |  | | | |
| wykazywał odpowiedzialność za powierzone mienie i bezpieczny sposób działania w miejscu pracy | | | | | | | | | |  | | | |  | | | |
| wykazywał gotowość do uzupełniania i krytycznej oceny wiedzy oraz jej wykorzystania w przygotowywaniu jadłospisów i posiłków | | | | | | | | | |  | | | |  | | | |
| angażował się w promocję prawidłowego żywienia | | | | | | | | | |  | | | |  | | | |
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| **Ocena (opisowa) odbytej praktyki zawodowej pod kątem:** | | | | | | | | | | | | | |  | | | |
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| **1. Przygotowania merytorycznego:** | | | | | | | | | | | | | |  | | | |
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| **2. Stosunku do wykonywania powierzonych zadań:** | | | | | | | | | | | | | |  | | | |
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| **3. Umiejętności pracy w zespole:** | | | | | | | | | | | | | |  | | | |
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| **4. Inne uwagi:** | | | | | | | | | | | | | |  | | | |
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| **Praktykę zaliczam na ocenę\*\*:** | | | |  | | | | |  | | |  | |  | | | |
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| \* niewłaściwe skreślić \*\* według skali ocen stosowanej na Uniwersytecie Zielonogórskim: bardzo dobry (bdb)– 5,0; dobry plus (db plus) – 4,5; dobry (db) – 4,0; dostateczny plus (dst plus) – 3,5; dostateczny (dst) – 3,0; niedostateczny (ndst) – 2,0. | | | | | | | | | | | | | |  | | | |
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|  | *(pieczęć instytucji)* | | |  | | *(data i podpis opiekuna praktyk)* | | | | | |  | |  | | | |
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|  | *(data i podpis koordynatora praktyk)* | | |  | |  |  | |  | | |  | |  | | | |