

ACTIVITY PLAN
INTERNATIONAL EXCHANGE SCHOLARSHIP PROGRAM -
ENTREPRENEURSHIP MODALITY

STUDENT'S NAME:	
USP NUMBER:	COURSE/FACULTY:
PHONE:	EMAIL:
SUPERVISOR PROFESSOR AT USP:	
DEPARTMENT:	EMAIL:
FOREIGN INSTITUTION	COUNTRY:
SUPERVISOR PROFESSOR AT FOREIGN INSTITUTION:	
DEPARTMENT:	EMAIL:
NUMBER OF MONTHS: 1 () 2 () 3 () 4 () 5 () 6 ()	
START: / /	CONCLUSION: / /

1. SUBJECT
2. ABSTRACT
3. STUDENT PRESENTATION
4. ENTREPRENEURSHIP/INNOVATION COURSE DESCRIPTION
5. INSTITUTION PRESENTATION
6. OBJECTIVES
7. FINAL PRODUCT EXPECTED
8. PLANNED ACTIVITIES
9. MONTHLY SCHEDULE

ACTIVITIES	1	2	3	4	5	6

10. REFERENCES

STUDENT

FOREIGN SUPERVISOR

FOREIGN INSTITUTION