

Nele Demedts / Dr. Christiane Stroth

Internship Financing

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**PROMOS – Internship Programme**

**Certificate of Internship**

*Note: Please type your answers into the areas indicated (grey).*

**Details of the Student**

|  |  |
| --- | --- |
| Full name |  |
| Date of birth |  |

**Details of the Receiving Company / Institution**

|  |  |
| --- | --- |
| Name and address of company/ institution |  |
| Supervisor  (full name, email) |  |

**Details of the Internship**

|  |  |
| --- | --- |
| Duration of internship (dd.mm.yyyy-dd.mm.yyyy) |  |
| Main tasks |  |
| Special comments/ Evaluation |  |

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Date, Signature of person responsible, Company stamp