AS Fakultät
Architektur und
Sozialwissenschaften

I-HTWK
Hochschule für Technik,
Wirtschaft und Kultur Leipzig

Confirmation of internship

(Due: <u>not later than four weeks</u> after the beginning of the following semester)

☐ practice module I ☐ practice module II

1. **Student:** name, address, email address

2. **Internship organisation:** name, address, telephone number, email address

3. **Supervisor:** name, professional degree/qualification, email address

4. **Start of the internship:**

End of the internship:

Overview of the internship process

Period from – till/ weeks	**Areas of responsibility**	**Short description of activities**

5. **The student has successfully completed the internship.**

☐ yes ☐ no

Place, Date

Stamp and signature
supervisor