

REGISTRATION FOR THE COMPULSORY INTERNSHIP - MARKETING AND INTERNATIONAL MANAGEMENT

Master Applied Business Administration (12W) L 066 918

for the
WS/SS 20..../....

1. Information about the student

First and last name:

Matr.-Nr.:

Study code:

Tel.-nr.:

E-mail address:

(Planned) start date and (planned) date of closure of the
practice. (Covers a period of 4 months in total, at least 30 hours per week.)

2. Details of the placement provider

Company:

Address:

Tel.-nr.:

Contact person (if available):

3. Project object

(Brief description of the project or activities to be carried out.)

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Signature of the student

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Place, date

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Internship provider confirmation

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Place, date