Registration of an Internship

According to § 8 of the study guidelines and § 27 of the examination regulations of the degree program of Computer Science of Leipzig University of 26th July 2011. Minimum total work load: 300 hours (=10 Credit Points)

Name____________________ First Name_________________ Matr.-No._______________

The company / enterprise / institution
Name and address

grants me the possibility of completing an internship.
Intended activity / task of work (if necessary attach separate sheet)

Duration from: ______________ to:________________

To be completed by the enterprise:
The support of the trainee and a final evaluation will be provided.
The responsible person on the part of the company / enterprise is:
____________________________________

To be completed by the mentor (test legitimated person from Institute of Computer Science):
It is confirmed that the proposed internship is equivalent to the effort of a deepening module. A final assessment (pass/fail) is assured.
The mentor on the part of the University is:
____________________________________

Approval note of the Examination Committee:
The intended activity is considered a valid internship in the sense of the examination regulations of the degree program of Computer Science: approved / not approved.

__________________________________________
Date Chairman of the Committee

Acknowledgement by the student
The manner of billing the internship is determined by the mentor (e.g. written internship report, presentation, etc.)

__________________________________________
Date Signature of the student