

Internship certificate (Bachelor's degree programs)

Student _____, enrolled in the Bachelor's degree program
_____ with student ID number _____, has completed an
internship in our company / institution _____ from
_____ to _____.

The weekly workload amounted to _____ hours. In total _____ hours were completed during the
internship. Was the internship full-time? Yes No

During the internship _____ assigned in the following fields of work:

In detail, the following tasks were carried out:

Supervision of the internship was provided by _____

(Phone: _____ / Email: _____).

Place, Date

Signature of employer

Stamp