

Internship agreement for Project-based Internship

Internship agreement: To be completed before the internship

Company or organisation

Company name:

Address:

Postal code:

City:

Country:

Contact person:

Phone:

E-mail:

og:

Student

Full name:

Address:

Postal code:

City:

Country:

Phone:

Email:

Scope of the internship (please tick the relevant box)

<input type="checkbox"/> 10 ECTS (250-300 hours)	<input type="checkbox"/> 20 ECTS (550-650 hours)
Total number of hours:	Total number of hours:
Internship period (DD MM-YY to DD-MM-YY):	Internship period (DD MM-YY to DD-MM-YY):
Number of weeks:	Number of weeks:

