

## Certificate of Internship

Mr / Ms \_\_\_\_\_

Student Number: \_\_\_\_\_

enrolled since \_\_\_\_\_

Semester: \_\_\_\_\_

in **Bachelor Combined Studies** with the subjects

1. \_\_\_\_\_ 2. \_\_\_\_\_

successfully completed a **General School Internship**

at the school \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

during the period from \_\_\_\_\_ to \_\_\_\_\_.

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**School:**

\_\_\_\_\_  
Signature of the mentor

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of the head of the school