



Statistics Form for external Internships

Degree:

Semester:

Internship Company:

Place:

Type of Company:

Contact:

Number of Employees IT:

Type and Extent of Activities:

Type of Trainee Contract:

Type of Payment:

For your Fellow Students

I hereby allow the faculty of computer science to publish my name and e-mail address to my fellow students which are interested in an internship at the same company.

Please do only fill out the following box if you have permitted publishing in the preceding section "For your Fellow Students".

| | | |
|---------|-------|-----------|
| Name: | | |
| E-Mail: | | |
| _____ | _____ | _____ |
| Place | Date | Signature |