# Certificate for successful completion of an internship 

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for the Bachelor course of studies in Sport Science <br> I declare that the student <br> |  | WS |  |
| :---: | :---: | :---: |
| Name | Matriculation number | Start of program |

has successfully and regularly completed his/her internship at our institution. The internship has fulfilled all requirements of TU München.

Duration of the internship:
to $\qquad$ $=$ $\qquad$ weeks (min. 6 / max. 20)

Activities during the internship:
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$

Name of internship supervisor
Signature of the supervisor

Stamp and address of the internship institution

I declare that I have completed the internship successfully and regularly as described above. All information provided corresponds to the actual course of the internship.

Approval by the Department

