

Certificate for successful completion of an internship

For the bachelor program B.Sc. Sport Science

I declare that the student

Name	Matriculation number	Start of program
has successfully and regularly complet requirements of TU München.	ed his/her internship at our institution. The	internship has fulfilled all
Duration of the internship:	to weeks (min. 6 / max. 20)
Activities during the internship:		
Name of internship supervisor	Signature of the	supervisor
Stamp and address of the internship in	stitution	
I declare that I have completed the inte provided corresponds to the actual cou	ernship successfully and regularly as descring successfully and regularly as descriptions of the internship.	ibed above. All information
Name	Signat	ture of the student
Approval by the School		
	Signature of the Internship C	Office