

Address of the internship facility

Name:

Street:

Postal code, place:

Phone:

Letter of reference

Mr/Ms
(Last name) (First name) (Date of birth)

has done an internship from to
for practical training as part of their university studies as follows:

Type of activity	Weeks
.....	
.....	
.....	
.....	
total of	

The regular working hours were: hours

Days of absence during the internship:
of which: days leave
..... days illness
..... days of absence for other reasons

Comments on performance and behavior (Assessment of the intern's performance and social behavior; use reverse side if necessary):

.....
.....
.....
.....

.....
(Place) (Date)

.....
(Signature) (Stamp)