

## Certificate of Attendance for an Internship

To be filled out by the administration of the host institution

It is hereby certified that

\_\_\_\_\_

First and last name of the student

\_\_\_\_\_

born (Date of birth [DD/MM/YYYY])

Has completed an internship at:

\_\_\_\_\_

Name and address of host institution

Time period of internship:

\_\_\_\_\_

First day and last day of the internship [DD/MM/YYYY]

Brief description of the tasks during the internship:

On behalf of the host institution:

\_\_\_\_\_

First and last name

\_\_\_\_\_

Date (DD/MM/YYYY)

\_\_\_\_\_

Function or position at the host institution

\_\_\_\_\_

Signature and Stamp