

## Completion of the compulsory internship for the M.A. program in Political Science Confirmation by the internship provider

Intern (name and matriculation number):
This is my __. course in module "Forschungs- und Lehrpraxis".
Name and address of the institution providing the internship:
Department/division:
Intern supervisor:
Tasks of the intern:
Starting and end date of the internship:
Working hours per week:

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature intern

\_\_\_\_\_  
Signature supervisor

The Political Science department should be most grateful if you could provide the intern with a detailed reference. Thank you.

If you have any questions please contact the responsible person for internship coordination, Ms. Angela Geck, at [master-pw@politik-uni-freiburg.de](mailto:master-pw@politik-uni-freiburg.de).