## Internship/work experience Certificate

First name, last name:	
Date of birth:	Place of birth:
accomplished practical training from	(= weeks)
at	
the degree program in □ 'Geography'/ □	ith the internship/work experience regulations for 'Environmental sciences'/  according to the examinations regulations of the programs.
Internship/work experience contents:	
<u>Comments:</u>	
(Place) (Date)	
	(Signature of the internship/work experience provider)
	We hereby approve of the internship/work experience according to the regulations mentioned above and grant
(Stamp of the internship/work experience provider)	weeks and ECTS- credits.
	(Date and signature of the supervisor at the Faculty of Environment and Natural Resources)

To be completed by University Freiburg