Eingangsstempel – Dezernat 3 / International Office

## Carl von Ossietzky Universität Oldenburg

## Confirmation of host organisation for internship (PROMOS)

1. Details of the student			
First name			
Last name			
Date of birth			
E-mail			
Course of studies			
Subject(s) of study			
Specialisation			

2. Details of the host organisation		
Name of the organisation		
Address		
City and postal code		
Country		
Website		
Name of supervisor		
E-mail		
Phone		

3. Details of the internship/ practical training				
Period of the internship	Start: End:			
Please note: The placement must be at least 6 weeks!				
Number of working days/working hours per day Please note: A full-time position is required. Working hours may not exceed 40 hours per week!	Days: Hours:			
Is this a paid internship? If yes, please state the amount.	Yes No	Payment: EUR/month		
Other benefits provided by the host organisation (e.g. accommodation, meals, transport)	accommodation meals transport other:	Estimated value: EUR/month		

Praktikumsbestätigung (Begleitdokument Förderungsantrag Auslandspraktikum)/ Confirmation of host organisation (accompanying document for funding internships abroad) Stand: 08/2024

4. Please give a detailed description of the work to be carried out during the internship/ practical training			
The following description is to ensure the high quality of the internship/practical training in your company/organisation. Please provide detailed information on the programme, specific tasks/projects, supervision and training objectives which are relevant during the internship.			
Knowledge, skills and competences to be acquired by the end of the internship			
Detailed programme of the training period (e.g. timetable of the internship, areas/fields the student will work in)			
Tasks of the trainee (daily tasks, project work)			
Monitoring and evaluation (e.g. preparatory meeting with the supervisor, weekly meetings, mid-term evaluation)			

## 5. Declaration

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The student will get a signed confirmation and/or a letter of reference by the end of the internship/practical training.

Place, Date

Signature of supervisor