

Dekanat | Geisteswissenschaftliche Fakultät Prüfungsreferat | Lehramtsstudien

Application for approval of a career-oriented internship or internship for relevant work experience (abroad) gem. Satzungsteil Studienrechtliche Bestimmungen

Personal Data			
Surname:	First Name:		
Carrianie.			
Tel.:	Registration No.:		
Study programme:			
Initial D v D N ()			
Application Yes No (please enclose	a copy of any internships that have already been approved)		
Information about the internship			
☐ Internship national	☐ Internship abroad		
Name Company/Institution:			
Address:			
Contact person:			
Telephone nr./E-mail address:			
Expected duration (from-to):			
Extent of activity (working hours/week):			
To be completed by the student: DETAILED (add additional pages if necessary!) information about the intended activity or academic event and its relevance to the specified degree programme. ESPECIALLY in the case of a compulsory practical training (§ 11), the internship must comply with the requirements set out in the curriculum. In cases of doubt, the relevant organs of the law regulating university studies must be contacted BEFORE THE INTERNSHIP BEGINS.			

Application for approval of a career-oriented internship or internship for relevant work experience for			
☐ Compulsory practical training:			
☐ free elective course	☐ relevant to subject area as a useful addition		
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D .			
Date	Signature of the student		
Approval free elective cours	e of (Vice-)Dean of Studies		
☐ Completion of the internship at the above-mentioned company/institution is credited to the extent of			
	e elective course (8 weeks of full-time employment = 12 ECTS)		
☐ approved/recognised ☐ not approved/not recognised*			
Approval Comulsory practia	I training or relevant to subject area as a useful additon		
Approval Comulsory practial training or relevant to subject area as a useful additon of Chairperson of the Curriculakommission (CuKo)			
Completion of the compulsory practical training at the above-mentioned company/institution is credited to the extent of ECTS credit points (see curriculum)			
OR			
Completion of the internship at the above-mentioned company/institution is credited relevant to subject area as a useful addition			
☐ approved/recognised ☐ not approved/not recognised*			
*Reason (in case of negative decision):			
Date	Signature Chairperson CuKo resp. (Vize-)Dean of Studies		

Confirmation

To be filled in by the host institution/host organisation after the placement. For university use:

Host Institution / Host Organisation:

Serves as a submission to the responsible student body of the Karl-Franzens-University Graz for the consideration of the practice as a free optional subject or as a compulsory internship (see §§ 10 (3) and 11 of the statute of the study law of the Karl-Franzens-University Graz). This confirmation can be replaced by a confirmation of participation.

Name		
Address		
Contact Person		
Telephone	Email	
Confirmation	of Placement / Work / Participation issued fo	Dr: Date of birth
Family name, first name		T T M M J J
Address		
Type of employment		
Duration of employment from	(Voluntary service, internship, academic activity,)	
Extent of employment	Working hours/week	S
(1		
Comments:		
 Date	Signature and	stamp of host institution