

CONFIRMATION OF THE COMPLETION OF THE PRACTICE PROJECT BPS

Student

Matriculation no.

Training Establishment

Length of Internship from to

which equals working days = working hours

Periods of absence working days = working hours

Periods of absence have to be made up for.

Date of complementary seminar

that took place during the practical study period from..... to

The student was engaged in the following work in the specified period

1.
2.
3.
4.
5.
6.
7.
8.

.....
Date, Town/Country

.....
Stamp and signature of the company
I hereby confirm with my signature the accuracy of the
information provided above

Dieser Sichtvermerk wird erst nach vollständiger Eintragung aller Angaben im Referat für Berufspraktische Studien erteilt.

Abgabe Studienarbeit ()
Datum

.....
Sichtvermerk BPS Referat FB06

Universität Kassel
FB06 Architektur Stadtplanung Landschaftsplanung
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34127 Kassel