**INTERNSHIP CERTIFICATE**

(To be filled out by the internship provider after completion of the internship)

Name (student) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

has accomplished an internship from \_\_\_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

according to the regulations for internships for the degree programme Master of Science at the Faculty of Forest and Environmental Sciences of the University of Freiburg.

Times of absence:

Contents of the internship:

