Gesamtschule Stierstadt

Integrierte Gesamtschule des Hochtaunuskreises mit gymnasialer Oberstufe

Jahrgangsteamschule - Ganztagsschule

(Comprehensive school including an upper secondary level)

Rückgabe bis spätestens 19.03.2027 an die Tutoren !!!

Betriebspraktikum E2
Vocational internship
Confirmation of internship by the student
and
Confirmation of internship by the host organisation

_____
(name of student, tutorial group)

_____
(address, telephone number)

My vocational internship will take place from..... **07.06.2027**..... bis ..... **18.06.2027**..... at

(name, address, email and telephone number of host organisation)

My internship supervisor will be Mrs/Mr .....

O For confirmation by host organisation, please see letter attached.
O For confirmation by host organisation, please see below.

_____
(date, student's signature)

We herewith confirm that the student _____ *(full name)*

can complete a vocational internship in our organisation from ..... to .....

Internship supervisor will be Mrs/Mr .....

_____
(stamp, signature)