



FRENCH PROGRAMME

APPLICATION FOR FREN3034, Internship for Students of French

Course supervisor: Mr Sylvain Holtermann

Student university number: _____

Student's full name: _____

Date: _____

Proposed organization and Contact person

Description of the internship

Details of the Internship (e.g. working hours/ schedule/ duration)

**NOTE OF ACCEPTANCE OF THE STUDENT AS INTERN BY THE ORGANISATION
(date, signature and stamp)**
