



## CERTIFICATE OF INTERNSHIP

(In accordance with the subject-specific examination regulations 2023 for the Bachelor's degree program "BWL" (full subject) and in accordance with the valid internship regulations)

for submission to the internship supervisor,  
as an attachment to the internship report

**Name, First Name**

**Matriculation number**

**Address**

**was in the time from**

**until**

work in our company/institution as an intern in accordance with the internship regulations of the University of Bremen for the voluntary internship of at least 8 weeks or maximum 6 month with a total of minimum 320 hours (full-time, part-time or mixed - please indicate):

**Industry**

**Description of tasks**

**Total amount of weeks**

**Hours worked/week**

**Deviating working hours  
(please explain, e.g. for  
part-time)**

**Contact Person**

**Name of company/institution**

**Address of company/institution**

**City, Country, Date**

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**Stamp/Seal and Signature**