

## Internship / Project Application Form

Student contact details	
Last name:	First name:
Address:	
Telephone:	Email:
Student ID:	
Supervisor	
Last name:	First name:
Select one	
Internship with report (3 ECTS – 6 ECTS for students h	aving started before 2024)
Short description of the internship topic:	-
Carried out in the following department:	
Dates: from	
(6 weeks minimum, full-time)	·
(o weeks milliman, run-ume)	
Company/Institution contact details	
Company/Institution name:	
Address:	
Website:	
	Donartment
Person in charge (tutor):	Department:
Telephone:	Email:
Important notes:	
Approval of the Director of the MScF in mandatory.	
	mester of the MScF programme nor should the internship
negatively affect other course work.	,
3) By signing, the student confirms meeting the requi	rements for carrying out an internship according to the
applicable study regulations and directive.	
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Data Science Project (9 ECTS)	
Short description of the topic:	
Sustainability Project (9 ECTS)	
Short description of the topic:	
Student signature:	Date:
<u> </u>	
Faculty approval	
Signature director MScF programme:	Date:
(for the internship with report application)	
( a.eterrioring marriages) applications	
Signature supervisor:	Date:

