

## Internship Certificate

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Name, date of birth

student of the \_\_\_\_\_ grade at the HÖHERE LEHRANSTALT \*SOZIALMANAGEMENT  
UND FACHSCHULE FÜR WIRTSCHAFTLICHE BERUFE DER STADT DORNBIRN (College for  
Occupations in Social Management) has completed an internship during the summer vacation.

from \_\_\_\_\_ to \_\_\_\_\_ ( \_\_\_\_\_ working hours per week).  
(date) (date)

### Sponsoring organization/

**Institution:** \_\_\_\_\_

\_\_\_\_\_

Address/country: \_\_\_\_\_

Tel., E-Mail: \_\_\_\_\_

Contact: \_\_\_\_\_

The student worked in the following fields:

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Date, signature and stamp of the institution