

Department of Mathematics and Computer Science

Registration for a Research Internship ('Forschungspraxis') – MSc Data Science

Please tick: Course Study & Exam. Regulations from 18 April 2019 – 0590a 30 June 2021 – 0590b

Student:

Surname: _____ First Name(s): _____

Student ID No.: _____ Subject-specific semester (FS): _____

Title, First Name, Surname of Supervisor: _____

Internship Company Name: _____

Address: _____

Telephone and Email: _____

Short Profile of Business (link may be given): _____

Time period from – to (min. 7 weeks): _____

Topic (content, planned activities, internship goals): _____

Date and Student's Signature

Date and Supervisor's Signature

Authorised Examiner ('prüfungsberechtigte Person'):

Title, First Name, Surname: _____

Institute: _____

Telephone: _____

Email: _____

I hereby approve the above-named internship as a research internship for the MSc Data Science. In addition, I am prepared to confirm the successful completion of the internship, namely by reading the report and listening to the concluding presentation. The internship is not graded.

Date and Examiner's Signature

Please return the completed form to: Examination Office for Computer Science
Freie Universität Berlin,
Arnimallee 14, Room 1.1.14b
14195 Berlin
or email to maria.koekenhoff@fu-berlin.de