

**Certification for Completion of a Research Internship**  
**Data Science Master's Degree Program Study & Examination Regulations**  
**18 April 2019 – 0590a)**

**Student:**

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Enrollment No.: \_\_\_\_\_ Email: \_\_\_\_\_  
Please enter Computing Services (ZEDAT) account

**Supervisor:**

Internship Placement: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

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

Number of hours (min. 270): \_\_\_\_\_

\_\_\_\_\_  
Date and Supervisor Signature

**Mentor:**

Title, First Name, Surname: \_\_\_\_\_

Institute: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**I have accepted the submitted report on the research internship which comprises 5-10 sides.**

**The concluding lecture (30 minutes) took place on**

Date: \_\_\_\_\_

Topic: \_\_\_\_\_

Institute: \_\_\_\_\_

\_\_\_\_\_  
Date and Mentor Signature

*Please send completed form to:*  
**Examinations Office for Computer Science (FU Berlin)**  
**Arnimallee 14, Room 1.1.14b**  
**14195 Berlin**