Registration Form Appointment for trainees for the practical semester (internship)



Faculty: Economics and General Sciences Engineering Sciences

Course of Study:					
Name of Institution:					
Name of Institution.	I				
Address of the institution (including subsidiaries etc. where the internships take place)					
and contact person	for applications:				
Telephone:					
Homepage:	E-Mail:				
Country/State:					
	Ide	nt-Nr. (will be is	ssued by the University	/):	
Range of products of	or different areas of re	esponsibility at	the institution:		
Do you regularly offer internships ? yes no					
Do you agree with the publication of the above-mentioned data in the Intranet of the University (online-search for internships)?					
Total number of full-time employees at the institution:,					
Place, Date		Signature			
Authorization of th	e University				
Fully approved As exceptional case approved					
A	nsbach, (The representative for practical semesters)				
Ansbach,			(ine representative for p	iractical semesters)	
Besucheradresse: Hochschule Ansbach Residenzstraße 8 91522 Ansbach	Postanschrift: Hochschule Ansbach Postfach 19 63 91510 Ansbach	Vizepräsident Vizepräsident	rf. Dr. Gerhard Mammen cin Prof. Dr. Ute Ambrosius c Prof. Dr. Norbert Kaiser erungsdirektor Hans-Peter Smolka	university of applied sciences	