

Institute of Psychology -

# **Internship Report Bachelor**

#### Authorization to read the internship report:

(The following consent can be refused without giving reasons.)

I agree that my internship report will be available to other fellow students at Osnabrück University on a passwordprotected online platform to inform themselves about possible internship offers. In case of agreement, this first page with personal data will be saved separately (not online accessible) and will not be forwarded to third parties. The report may also not contain personal data of third parties. Responsibility for the content of the report lies within the person giving the consent. This consent is given voluntarily. In the case of non-consent, there are no disadvantages.

- [ ] I agree.
- [ ] I disagree.

As **internship provider** I am informed about the above-mentioned release of the internship report for students of Osnabrück University to inform themselves about potential internship offers and

- [] l agree.
- [ ] I disagree.

Place, Date	_Signature (Student):	
Place, Date	_ Signature (Internship provider):	
Student name:		
Address:		
E-Mail:		
Course of study:		_Semester:
Internship supervisor:		
Contact data of supervisor:		

Name of internship institution:
Place and country of institution:
Main category:
Subcategory (e.g. psychotherapy, consulting, coaching, recruiting, …):
Main focus of activity:
Time period of internship:

# Systematic information about the internship institution:

Structure, organizational structure, products and services, areas of responsibility; employees and clients/customers; the department or area in which the internship was completed should be described. (about 200 words)

# Description of own activities during the internship:

A description of the own activities in the internship and the process in which the activities are integrated, the qualification requirements in this field and a reflection of the own professional and interdisciplinary qualifications that could be used. (about 250 words)

# Evaluation of the internship

# Will the institution continue to accept interns?

[]Yes []No []I don't know

# Was the internship paid?

[ ] Yes, as follows: \_\_\_\_\_ [ ] No

# Please rate the following criteria with grades:

	1	2	3	4	5	6
Supervision						
Personal responsibility						
Diversity of tasks						
Level of difficulty of the tasks						
Entry opportunities						
Working atmosphere						
Subjective learning success						

### How were the working hours?

[ ] fixed working hours (usually from\_\_\_\_\_ to\_\_\_\_ o'clock)

[ ] no fixed working hours ( \_\_\_\_\_ hours per week)

### What time model did the internship follow?

[ ] full-time [ ] part-time [ ] during the semester

Overall satisfaction with the internship (grade): \_\_\_\_\_

# Would you recommend the internship to others?

[]Yes []No [] no information

### Further information/notes:

(for internships abroad: practical information. e.g. accomodation, financing, ...)