INTERNSHIP AGREEMENT

Ruhr University Bochum Master in Cognitive Science

Student name:

Signature

Program Director of Master in Cognitive Science: Prof. Dr. Jonas Rose

Signature

Head of Lab/Office:

Address:

Signature

Internship Agreement
Dates of the internship:
Project Title:
Duties of the Student: - Regular attendance - Full-time work
 Commitment of the intern's supervisor: Educational support Involve the student in a research project Offer an adequate academic workspace Ensure grades
Special Requirements: