



Application form for internships abroad

YOUR PERSONAL DATA

Surname name(s):

First name(s):

Date of birth (dd/mm/yyyy):

Gender: male female divers

Citizenship¹:

Current address in Germany

c/o²

Street

Postcode:

City:

Phone number:

Email:

What do you study at SRH Berlin University of Applied Sciences?

Which study programme are you currently enrolled in?

Name:

Campus:

Berlin Dresden Hamburg

Study cycle:

Bachelor Master Double Degree

Language of instruction:

German English

PLANNED INTERNSHIP PERIOD ABROAD

From dd/mm/yyyy till dd/mm/yyyy

Is it a mandatory or voluntary internship?

In which country would you like to do your internship?

¹ If more than one, please give the one that you will use when applying to the host university and the visa, if applicable.

² If applicable



YOUR LANGUAGE SKILLS

Please answer the following questions regarding your language skills:

What is/are your native language(s)?	
In which language(s) do you plan to do your internship abroad?	
What is your language level in this language?	

YOUR APPLICATION DOCUMENTS

Please submit your application documents latest 4 weeks before the start of your internship by email to internationaloffice.hsbe@srh.de . Incomplete and/or late applications may not be considered. Unless otherwise noted, all documents must be in English or German.

Your complete application package consists of the following documents:

Fully completed, legible application form for internships abroad	
Current enrollment certificate (Immatrikulationsbescheinigung) (Download on CampusNet/ contact Student Service)	
Copy of your internship contract or email/ proof of confirmation from the internship provider with exact dates of the internship	

By signing this application form, I give the permission to disclose (e.g. via email), transfer and upload my personal information to the responsible departments at SRH Hochschulen Berlin GmbH, as well as at the host institution and on the online platforms necessary to correctly process the study abroad semester.

With my signature I give my consent to the storage of the personal data collected through the application form and the documents submitted for a period of 5 years, as dictated by retention obligations of SRH Berlin.

SRH Hochschulen Berlin GmbH adheres to the current European Union data protection standards (GDPR) but will not be held liable for the data protection standards of third parties outside the European Union.

This declaration of consent is voluntary and can be revoked entirely or partially at any time, consequences will be communicated. Your revocation is to be sent to internationaloffice.hsbe@srh.de.

Place: Date (dd/mm/yyyy): / /20 Signature: