HT20

AGREEMENT ON INTERNSHIP:

BVPB01, The Bachelor's programme in beh	avioural science, Lund University
---	-----------------------------------

Student's personal o	lata:					
Name:						
Personal ID no (yymm	dd-xxxx)					
E-mail:						
Specialisation:	Psychology	* 50	ciology	Education		
Internship informati	on:	DVA	212			
Internship location:	N/JT		0/~			
Geographical location:	2/5	0000				
Internship supervisor:	5/2	1256	00000	3		
E-mail:						
Telephone:	1 1 2		1253			
Internship duration: 20200831 – 20201218						
Main tasks during the internship (briefly described):						
As internship supervisor I hereby certify that the internship will follow the objectives of the course provider. I certify that the student on placement will get an introduction to the place of work and will be provided with continuous supervision and also get time for academic course assigments. A certificate of attendance and internship completion will be sent to the Department of Psychology at Lund University on completion of the internship period.						
Date:	Signature, intern e	ship supervis	or:			
to hand in a report for exar	nd travel connected w	vith the internshi	p. On completion	of the internship, I undertake		
University.						
Date:	Signature, studer	ER	SIT	ET		
As examiner and course leader for the internship I hereby approve the above-mentioned internship.						
Date:	Signature examir	ner and cours	e leader:			