



REGISTRATION FORM – JOB SHADOWING FOR INTERNATIONAL STUDENTS

I. Contact information

Name, first name

Email

Street, number

ZIP code

Place

Fon (mobile)

II. Studies

Study program

Planned degree (B.A., M.A.)

Expected date of completion

III. Motivation for participation in the program

Letter of motivation (max. 400 characters)

IV. Desired work areas for shadowing

1. _____

2. _____

3. _____

What work area(s) would you like to gain insight into?

V. Desired employers for shadowing

1. _____

2. _____

3. _____

Which employers - from the list of participating partners or other *regional* employers - would you like to meet?

VI. Job Shadowing in German language

In addition to Job Shadowing International, we also offer Job Shadowing in German. Please let us know in which language you would like to participate in the program.

☐ German ☐ English

Date, signature

Please send the registration form to Nathalie Bödicker: nathalie.boedicker@leuphana.de