



REGISTRATION FORM – JOB SHADOWING FOR INTERNATIONAL STUDENTS

I. Contact information

Name, first name

E-Mail

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. Which employer(s) from the list of participating companies / institutions would you like to visit? (max. 3)

1. _____
2. _____
3. _____

V. In which fields of activity offered by the companies would you like to gain an insight?

1. _____
2. _____
3. _____

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 Birte Godau: birte.godau@leuphana.de