



## 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?

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Date, signature

Please send the registration form to our team: [henrike.wehrkamp@leuphana.de](mailto:henrike.wehrkamp@leuphana.de)