



## 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?

#### **I. Desired employers for shadowing**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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

\_\_\_\_\_  
Date, signature

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