

Advanced Research Internship (ARI) Evaluation Form (SE0208)

Information of the intern(s)

last name, first name:

matriculation number:

Assessment of the ARI by the authorized examiner(s).

title of the ARI:

The workload to complete the ARI was as stated below:

200 hours attendance time (6 weeks) plus 40 hours self-study = 240 h (8 ECTS).

Date of presentation:

The learning outcomes are assessed as (passed /not passed)

.....
(name, first name of the examiner)

.....
(if applicable, name, first name of the supervisor)

Garching, (date)

(signature of the authorized examiner(s) and institute stamp)