

**ADDRESS OF COMPANY**

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**INTERNSHIP - EVALUATION REPORT**

for the \_\_\_\_\_ practical semester / practical training  
in the semester \_\_\_\_\_

Ms./Mr. \_\_\_\_\_  
born on \_\_\_\_\_ in \_\_\_\_\_

Student of the **Fachhochschule Rosenheim, - University of applied sciences-**  
**Hochschulstr. 1, 83024 Rosenheim, Germany**  
Telefon: +49 8031 805-158, Fax-Nr.: +49 8031 805-139

Course of studies: \_\_\_\_\_

Field of study or main field of studies: \_\_\_\_\_

has completed the practical training from \_\_\_\_\_ to \_\_\_\_\_

He / she has completed the requirements according to the training plan for the practical se-  
mester:  **yes** /  **no**

Number of days absent: \_\_\_\_\_ (total amount)

Number of days sick: \_\_\_\_\_ (total amount)

Other absences: reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Comment:**

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\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Stamp of Company, Signature of coordinator