Internship Agreement

This agreement regulates the relationship between

1. Company or Organization (hereinafter referred to as "Company")

Company Name:	
Address Street:	
Address ZIP-City:	
Address Country:	

and

2. Student (hereinafter referred to as "Intern")

Last Name:	
First Name:	
Address Street:	
Address ZIP-City:	
Date of Birth:	dd-mm-yyyy
Place of Birth:	
Country of Birth:	

Degree program and study level of the student at Pforzheim University:

Pforzheim University (Hochschule Pforzheim) in Pforzheim, Germany (hereinafter referred to as "Pforzheim" takes good note of the following agreement.

Article 1: Purpose of the Internship

The internship is intended as a time of practical training for the student and is meant to provide him or her with the opportunity to apply the theoretical knowledge acquired during his or her studies in a work environment. The company is not meant to derive financial benefits nor disadvantages from the intern's presence.

Article 2: General Terms and Conditions

 Article 2.1 Duration of the Internship

 The internship shall begin:

 dd-mm-yyyy

 The internship shall end:

Article 2.2 Place of the Internship

If appropriate: the internship shall take place at the division/department:

Article 2.3 Subject Matter of the Internship

The following fields shall be covered by the internship:

Article 2.4 Internship Supervisor

The company's internship supervisor shall be:

Article 2.5 Working Hours

Working hours per week:

Any training costs incurred during the internship shall be covered by the company. Travelling costs as well as living expenses and accommodation costs shall be covered by the intern. The intern shall not be entitled to financial compensation during his or her internship. It is within the discretion of the company to provide financial support to the student to help cover his or her expenses.

Article 3: Student Status

The intern shall remain enrolled as a student at Pforzheim for the entire duration of the internship, provided he or she complies with the registration deadlines and pays his or her semester fees to Pforzheim on time.

Article 4: Insurance

All and any insurance-related matters lie within the intern's field of responsibility. Neither Pforzheim nor the company shall be held liable in the case of an accident. The intern is required to present a "Declaration on Insurance Cover" to the company providing the internship as proof of his or her sufficient insurance cover with regard to health, accident, and personal liability insurance.

This agreement shall not constitute any basis for rights of recourse against Pforzheim on the part of the company for damage compensation claims which the company may be entitled to from the student or for damage compensation claims incurred by third parties against the company due to a breach of duty by the student.

Article 5: Obligations on the Part of the Intern

During his or her internship, the intern shall be subject to the company's terms and regulations, in particular with regard to working hours, code of conduct, safety practices and confidentiality rules.

This agreement shall not constitute any basis for rights of recourse against Pforzheim on the part of the company for damage compensation claims which the company may be entitled to from the student or for damage compensation claims incurred by third parties against the company due to a breach of obligation by the student.

Article 6: Obligations on the Part of the Company

After the end of the internship, the company shall provide an internship certificate to the intern.

Article 7: Right to Give Notice

Both the company and the intern shall be entitled to terminate the internship for good cause, for instance in the case of a breach of or non-compliance with the provisions laid down in this agreement.

Representative of the Company or the Organization:

Place and Date:	
Name:	
Signature:	
Student:	
Place and Date:	
Signature:	

Noted by Pforzheim University, International Programs

Place and Date:	
Name:	
Signature:	

Student's Declaration concerning Insurance Cover

Last Name

First Name

I hereby declare that I am aware of all obligations for compulsory insurance for the duration of my internship in the country of internship. I hereby confirm that I have taken out insurance with the below-mentioned insurance companies and that sufficient insurance cover for the entire duration of my internship is guaranteed.

Health Insurance

Insurance Company	
Insurance Number	

Accident Insurance

Insurance Company	
Insurance Number	

Personal Liability Insurance

Insurance Company Insurance Number	
Place and Date: Student's Signature:	

For administrative service	ces		
Your student ID / Matrikel			
When did you start your study program			
In case of financial support:			
Name of the bank			
BIC			
IBAN			
Communications:			
Email address			
Mobile phone			