FTN - rmn²

INTERNSHIP APPLICATION

Please fill out this application form and return it along with your resume to: praktikum@rmn2.de

	Current Date	
First name:	Last name:	
☐ Male ☐ Female Date of birth:	Place of birth:	
Phone Number:	email:	
Personal Statements:		
1 Why are you interested in an internship within FTN – rmn²? And how did you hear about us?:		
2 Which research groups here would you expec	t to collaborate with?	
Supervisor:	email:	
Institute / Department:		
Supervisor:	email:	
Institute / Department:		
3 Briefly describe why do you want to collaborate with them?		
4 What specific experience would you like to gain from doing an internship within FTN – rmn ² ?		
5 Where do you see yourself in 5 years? Describe your long-term career goals:		

AVAILABILITY

6 What days and times are you available to work in the la	ab and for how long?	
Proposed Start:	Proposed End:	
Available dates:		
Available times:		
knows you from a course, or personal character reference Reference #1)
Name:	Relationship to applicant:	
Phone Number:	email:	
Reference #2		
Name:	Relationship to applicant:	
Phone Number:	email:	