**Application for IPSAS internship program**

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| **Name of the student** |  |
| **School/University** |  |
| **Full address** |  |
| **Passport/ID number** |  |
| **Contact/Host person** |  |
| **Duration of the internship** |  |
| **Total number of hours** |  |
| **Accommodation expenses** |  |

**Bank details of student**

|  |  |
| --- | --- |
| Account name |  |
| Name of the bank |  |
| IBAN |  |
| **SWIFT/BIC Code** |  |

**Description of the intership**

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| Describe shortly the tasks or objectives the student will be working on.  Describe the estimated timeplan, for example  - 4 hours per day, 3 days a week within 6 consequtive weeks in July and August  - 3 hours every Wednesday between March and June. |

**Signatures**

|  |  |  |
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| Student | Mentor | Head of IPSAS department |