

## Confirmation of your Teaching Practice Placement

### Student details

Name, Vorname	
Matrikelnummer	
Lehramt (G – HRG – Gy/Ge – BK)	
E-Mail-Adresse	

### Placement details

Institution + address (university, school, organisation...)	
Details of contact person at host institution who signed this document  (name + function + e-mail address)	
Time period (amount of hours, if possible)	
<b>Activities</b>  Lesson observations  Assisting teachers/team teaching  Teaching individual students/small groups  Lesson planning  Other	<b>Yes /No</b>

Contact person at host institution: I hereby confirm the correctness of the above information.

---

Place, Date

---

Signature

Stamp (if available)