UNIVERSITÄT DES SAARLANDES

Fachrichtung Psychologie der Fakultät für Empirische Humanwissenschaften und Wirtschaftswissenschaft (Department of Psychology – Human and Business Sciences)



Internship Questionnaire

(for students in a bachelor / master degree course "Psychology")

Institution

Please answer the following questions about your institution and your work.

Name of the institution	
Postal address of the institution	
Website of the institution (if available)	
Name of the supervisor	
E-mail for internship applications / Questions regarding internships	
Academic title ¹ of the supervisor (e.g., M.Sc.)	
Key activities of the institution and clientele	
Methods of the institution (e.g., specific diagnostic and therapeutic methods, personnel selection tests)	
Working tasks and responsibilities of the interns	
Type and extent of supervision of the interns	

¹ The mandatory internships of students in a bachelor or master degree course "Psychology" at Saarland University have to be supervised by a qualified psychologist (e.g., M.Sc.). If your institution does not employ a psychologist, interns need to ensure external supervision by a member of the Department of Psychology at Saarland University.

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Application Procedure

Please answer the following questions about the application procedure at your institution.

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Academic prerequisites (e.g., Psychology studies, bachelor's degree)	
Necessary application documents (e.g., résumé, certificates)	
Application deadline	
Number of internship positions	
Minimum duration of the internship	
Salary (if available)	
Further remarks	
to the responsible internship coordinator.	are committed to provide feedback about their internship All feedback is treated as confidential and helps us to about internships that correspond with their specific
	, agree that the student I supervised feeds experiences and impressions about the internship to the
_	on and information will be included in the internship logy. This database is only accessible within the IT
O ja	O nein
I agree to be mentioned by name in the inte	ernship database as contact person regarding internships.
O ja	O nein
Place and date	Signature of the supervisor

(Stamp of the institution)