

Form II: Progress report (PPE internship)

Student: before 50% of the internship period has passed, fill out this form and send it to both your internship supervisor (VU) and your internship mentor (at the internship organization).

General information	
Name student:	Student number:
Name and location internship organization:	
Name internship supervisor (at the VU):	
Name internship mentor (at the organization):	
Starting date internship:	

Questions (please use not more than 200 words per question)	
1. Describe briefly (with bullet points) the kinds of work you do at the internship.	<ul style="list-style-type: none"> • • • •
2. Do you work full-time at the internship? Give your exact working hours per week.	
3. Can you draw on PPE at the internship? Describe the knowledge/skills you apply.	
4. What do you learn at the internship? Describe the knowledge/skills you acquire.	
5. What will your research essay be about? Describe your topic and progress so far.	
6. Do you experience any problems at the internship? If so, which? What can be done?	

Remarks

Student
Signature:

Date:

Seen by academic advisor (at the VU)
Signature: Date: