

**STAY ABROAD Registration Form**  
**LABG 2009/2016**

This form is for those students who have to complete the Stay Abroad as part of their studies. On consultation with the appropriate member of the Sprachpraxis team (please see the iaawiki page for details of who to contact), please fill in the following boxed and return the form to the member of staff **before** you leave to go abroad.

Name of SA supervisor	
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Your details
<p>Full name:</p> <p>Student ID:</p> <p>Studiengang:</p> <p>Email Address:</p> <p>Mobile number:</p>

Details of your work place
<p>Company / Organization:</p> <p>Company's address:</p> <p>Contact person:</p> <p>Contact person's email address:</p> <p>Contact person's telephone number:</p> <p>Start and end date of placement:</p>

Please give an outline of what you plan on doing during your stay abroad

Staff member's signature		
I accept the placement described above.	Date:	