



MSc in Health and Medical Data Analytics

Thesis Agreement

EIT Health Labelled Degree programme

Location | Academic year 2021-22

www.eithealth.eu



Funded by the
European Union

1 The Educational or training institution

Friedrich-Alexander-Universität Erlangen-Nürnberg

Address

Name of the representative

Capacity of the representative

Department or Service

Phone

Email

2 Host Organization

Name of the Host Organization

First and Last Name of the Representative

Capacity of the representative

Phone

Email

Location of internship

Department/Service in which the internship will be conducted

Address



3 The Intern

Last Name

First Name

Gender : F M Other

Date of birth:

Student ID:

Address

Phone

Email

4 Internship Details

Subject of Internship / Master's Thesis:

Dates : from to

Representing a total duration of weeks

Advisor at the Academic Institution	Supervisor at the Host organization
First Name LAST NAME	First Name LAST NAME
Position at Academic Institution	Position at organization
Phone	Phone
Email	Email

Activities assigned:

Skills to be acquired or developed:

5 Signatures

For the Academic Institution	For the Host Organization
<i>Name, date and signature of the academic advisor at the institution:</i>	<i>Name, date and signature of the supervisor at the organization:</i>

Intern
<i>Name, date and signature:</i>