



## Questionnaire for the Internship in Zeuthen

Please send the completed questionnaire together with your application documents to:

**praktikum@desy.de**

### Kontaktdaten

First Name, Surname

☐ F ☐ M ☐ D

Address:

E-Mail-address:

Requested period:

Type of internship:

☐ Mandatory student internship ☐ School internship ☐ Voluntary internship

**Bitte wählen Sie den Fachbereich aus, der für Sie zutrifft:**

| Fachbereich Physik (max. 2 Bereiche wählen):   | Andere Fachbereiche:                                   |
|------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Particle Physics      | <input type="checkbox"/> IT/Computing                  |
| <input type="checkbox"/> Astroparticle Physics | <input type="checkbox"/> Electronics Development       |
| <input type="checkbox"/> Theoretical Physics   | <input type="checkbox"/> Detector Development          |
| <input type="checkbox"/> Accelerator Research  | <input type="checkbox"/> Electronics Training Workshop |
|                                                | <input type="checkbox"/> Mechanical Training Workshop  |
|                                                | <input type="checkbox"/> Construction / Design         |
|                                                | <input type="checkbox"/> Public relations              |

Is there a person at DESY with whom you have already made an agreement about supervision during your internship at DESY?

If so, with whom? \_\_\_\_\_