



Graduate Internship

1. Represented by [Staff member name] (Department)
2. _____(Name of intern) _____(email address) _____(matriculation number)
_____ (course title)
3. _____ (Company name and address),
represented
by (Employer Name), (Title), (email address)
4. Internship dates: From (insert date) to (insert date) included.
5. Graduation

The University of Edinburgh confirms that the intern graduated from the University of Edinburgh on (insert date of graduation) and is not a current student at the University.

Intern	Company	Careers Service

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