



## **Financial statement for the internship programme within the Hessen Global Program**

Name: (Family Name, First Name) \_\_\_\_\_

Internship time: from \_\_\_\_\_ to \_\_\_\_\_

- The student confirms that he/she is in funds of a minimum of 585 € per month during the internship time. (Please attach a certificate in the form of an account statement)
  
- If the student is not able to certify the amount himself, the parents must assure that they are going to cover the expenses of 585 € per month during the internship time.

I hereby confirm the accuracy of statement

\_\_\_\_\_  
date/ place

\_\_\_\_\_  
student's signature

\_\_\_\_\_  
parent's signature