



University of Trento
Department of Mathematics

Internship Report

Povo, dd/mm/yyyy

Host Organisation: [Company Name]

[City],
[Country]

Start Date: dd/mm/yyyy

End Date: dd/mm/yyyy

University Supervisor: Prof. [Name and Surname]

Company Supervisor: [Name and Surname]

Intern: [Your Name and Surname]

Registration Number: [Your reg. no.]

Department Internship Coordinator: prof. Fabio Bagagiolo

Internship Report

Internship Summary

E.g.: host, objectives, methodology, results, conclusions.

Signatures

University Supervisor: Prof. [Name and Surname]

Company Supervisor: [Name and Surname]

Intern: [Your Name and Surname]

Department Internship Coordinator: prof. Fabio Bagagiolo