

Working Days:

Monday

Tuesday

Wednesday

Thursday

Friday

First Name Last Name:

Applicant's email\*:

Cover's email\*:

Tick if you do not have cover.

Supervisor's email\*:

If applicable, email address\* for documentation:

\*Only Universität Hamburg work email addresses are permitted.

=

From

until

=

From

until

=

Remaining time =

### **Cover**

I will cover for the applicant during the above time period.

**Yes**

**No**

### **Supervisor**

I approve this application for the period indicated.

**Yes**

**No**