Final assessment form: Bachelor internship Biomedical Sciences

Radboudumc Name: Studentnumber: Title internship:

Code and amount of EC (as approved by the Board of Examiners):

Supervisor of the internship (name, titles): Host department (institution): City: Country: Radboudumc department for financial benefits:

ASSESSMENT:

Grade based on performance during internship (on a scale of 1 to 10, including half grades):

Grade internship article, first assessor (on a scale of 1 to 10, including half grades):

Grade internship article, second assessor (on a scale of 1 to 10, including half grades):

Difference between grades for internship article of first and of second assessor:

If applicable^{*)}:

Grade internship article, third assessor (on a scale of 1 to 10, including half grades):

^{*)} Third assessor is required if grades of first and of second assessor differ more than 1.5 point

Report is checked with Ephorus/turnitin and plagiarism is not detected

Crade internation (on a scale from 10 to 100)

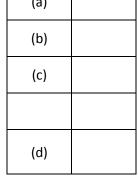
5(a) + 2(b) + 3(c) or <u>if applicable</u> 5(a) + (b) + (c) + 3(d)		
	FINAL GRADE (on a scale of 1 to 10, including half grades):	
Representative of the Board of Examiners:		
Signature:		

Date: (dd-mm-yyyy)

→ Note that supervisor and the bachelor internship committee can nominate this internship for the Dr. J. Bex award. For more information contact vera.vanlimpt@radboudumc.nl.

(a) (b) (c) (d)

True



False

22 EC

5BS