

LOGO

[Institution Name]  
[Department / Office]

## Student Internship Achievement Certificate

This certificate is proudly presented to

**[Student Full Name]**

Student ID [ID Number]  
Program [Study Program]  
Internship Period [Start Date] – [End Date]  
Host [Company/Organization Name]  
Organization  
Project/Role [Description]

In recognition of the successful completion of the internship program,  
**[Student Full Name]** has demonstrated commitment, professionalism,  
and achievement in assigned tasks.

We extend our deepest appreciation for the outstanding performance  
and valuable contribution throughout the internship period.

Date: [Certificate Date]

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[Supervisor Name]  
Internship Supervisor

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[Coordinator Name]  
Program Coordinator