

evidence student advocate.

First and last name: _____

Study program: _____

1 confirmation of activities.

Student representative in one of the following functions or committees:

| Function/committee | Minimum requirements | Time period |
|--|----------------------------------|-------------|
| Class Representation | Entire duration of study program | |
| Study Program Representation | Minimum of 2 semesters | |
| MCI University Representation | Minimum of 2 semesters | |
| Representation in the Academic Council | Minimum of 2 semesters | |
| Department, deputy, clerk | Minimum of 2 semesters | |

Date and signature Student & Career Center:

2 confirmation of reflection

Submission of a reflection on achievements, highlights, main themes, etc. in an appropriate format (this can be a paper, a screencast, a short video or a blog entry).

Date and signature öh mci:

Submission of confirmation/proof: Please have your function/role confirmed by the **Student & Career Center** badges@mci.edu by signing the form "Proof of Student Advocate". Afterwards please create a reflection (see above) and send it to info@oeh-mci.at together with the "Evidence Student Advocate". The chair of the öh mci will check and confirm the reflection and the badge will then be sent to you by e-mail.



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