**INTERNSHIP REPORT**

(**TITTLE** )

Arranged by:

**NAME (STUDENT NO)**

Done the internship period from (**date implementation**) at **(Venue**)

Approved by:

**Supervisor, Examiner I, Examiner II,**

|  |  |  |
| --- | --- | --- |
| Name | Name | Name |
| NIP. | NIP | NIP |

Knowing,

**Head of Study Program Culinary art, OTTIMMO International Mastergourmet Academy,**

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