

## Reporting sheet for language tandems, Study Buddies, mentoring program partners and all other tandem partners

Please complete this sheet together.

Name	es of partners		
Germ	an partner:		<del></del>
Intern	national partner:		
Period of partnership: from to _			(month/year)
At wh	ich university did your tand	em/mentoring pro	gram take place?
Unive	rsity of Bonn		
	□ Study Buddy/Pro Buddy F	rogram	
	☐ ASta language tandem		
	□ SLZ language tandem		
	☐ Departmental mentoring	program:	
	☐ Privately arranged langua	ge tandem	
Other	university (abroad)		
	□ Program-specific languag	e tandem (progran	n title)
	☐ Privately arranged langua	ge tandem	

How was the tandem organized?				
Which were the main lan	guages of communication?			
How often did you meet?				
□ Once per month	□ Once per week			
□ 2-3 times per month	□ Several times per week			
Where did you meet mos	t of the times?			
Which sights and location town?	ns did your partner show you in Bonn/your university			
Which would you conside	er as the benefits of the tandem?			

Which problems did you experience in your tandem?		
Please briefly tell us about three meet-ups or experiences you shared together.		

Name:	Date/signature:
Name:	Date/signature:

We confirm the accuracy of the information provided following mutual agreement.

\_\_\_\_\_

We would ask both persons to sign this sheet please. Where this is not possible, we would ask the relevant tandem partner to please confirm the accuracy of the details via email.