

TO THE DIREC	TOR OF THE	DEPARTME	NT OF
TO THE COOR	DINATOR OF	THE STUDY	COURSE IN
-			

cc: TO THE RELEVANT STUDENT SECRETARIAT

Subject: 1	Request j	for ECTS-C	redits reco	gnition for	r participation	in initiatives	promoted	by the	University

I, th	e undersigned			, Matr		
Tax	code	, tel	, ε	email		
			(use onl	y the institutional ema	ail username@s	studenti.unime.it)
ENR	ROLLED for the A.Y/	, Degree Pro	gramme in			
pena	suant to and in accordance alties referred in Article 76 ements,			•		
		DEC	LARE			
	ave participated in the follow ase the statement consists of s		ige must be signed i	n full)		
			(1) Initiative approved by			
N.	Event title		Department of:	Academic Senate	Date	ECTS-Credit amount
1						
2						
3						
4						
5						
6						
7						
8						
(1) Sp	pecify whether the event has be	en approved by Acad	emic Senate or ogani	sed by a Departme	ent.	
			EC	TS-CREDITS T	OTAL AMO	OUNT:
			REQUEST			
	recognition of the above repo	orted, relevant amou	nts of ECTS-credits	as:		
	Student's Choice activities					
	Additional training activities					
Ш.	Extra-curricular credits (comp	etence of Student Se	cretariats)			
	ASE NOTE: Please enclose with t icable and attendance certificate			ID document, copy	of attendanc	e booklet (if
• •	Place and date	J	Signature			