

The President Teaching Committee for the degree in	
5 <u> </u>	Matriculation no
I (name, surname)	
Born in (city, country)	on
Italian tax code (Codice Fiscale)	
Mobile phone univ	versity email address
resident in	()
enrolled for the academic year	on the year up to date/not up to
date with exams (fuori corso) on the First /S	econd Cycle degree in
curric	ulum class
HER	EBY DECLARE
That I have completed (cross the relevant box):	
	TRAINEESHIP/WORK EXPERIENCE
☐ internal curricular	external curricular
For a total number of hou	rs (credits/CFU) (1 credit/CFU = 25 hours)
	THESIS INTERNSHIP
For a total number of hou	
	OTHER (specify)
At (place)	
Period from	_ to
University Tutor	Title
	Signature
Company/laboratory Tutor	Title
Enclosures:	Signature
	niversity Tutor and Company/Lab Tutor)
Student's report on the work done	
Siena, (date)	Legible signature of the student