



DEPARTMENT _____

STUDENTS AND COURSE ADMINISTRATION OFFICE

Piazza San Francesco, 7/8 – 53100 SIENA

didattica.sem@unisi.it

To the Academic Board
Bachelor's/Master's degree course in

I, the undersigned, _____ student no. _____

Italian fiscal code _____ resident in (full address) _____

city _____ postal code _____ mobile phone _____

University e-mail account _____@student.unisi.it

enrolled for AY _____ in the _____ year on schedule repeating not on schedule (*fuori corso*) with

exams for the Bachelor's/Master's degree course in _____

(specify any specialization)

REQUEST

- to be able to attend the following Soft Skills course offered by the Santa Chiara Lab _____
worth 3 university credits

└ extra credits

- to be able to attend the following Soft Skills course offered by the Santa Chiara Lab _____
worth 3 university credits

└ extra credits

NOTE:

Master's degree course: please note that the activity "Santa Chiara Lab" (code 2009944 - 6 university credits) must be present in the study plan of the person concerned.

Any changes to the study plan must be made in the established periods. Indicate whether the activity is for extra credits.

Bachelor's degree course: For recognition in the study plan, requests must be assessed by the relevant academic board. Indicate whether the activity is for extra credits.

Siena, (date) _____

Student's signature _____