



UNIVERSITÀ
DI SIENA
1240

STUDENT AND COURSE ADMINISTRATION OFFICE
DEPARTMENT OF _____

TO THE PRESIDENT OF THE
TEACHING COMMITTEE

MATRICULATION No. _____

I, the undersigned _____, born in _____

on _____, Italian tax code (Codice Fiscale) _____ enrolled in the _____

year ☐ up to date with exams (in corso) ☐ not up to date with exams (fuori corso) ☐ repeating (ripetente) on

the ☐ first cycle (laurea) ☐ second cycle (laurea magistrale) degree programme in

_____, **confirm** that I was awarded an

Erasmus for Traineeship grant to train at the University of _____ (country

_____) in academic year _____ and **request approval for** the Erasmus for

Traineeship work plan below:

TRAINING ACTIVITY TO BE RECOGNIZED

HOST INSTITUTION	EDUCATIONAL ACTIVITY/TRAINEESHIP	PLANNED MONTHS/WEEKS/HOURS OF TRAINEESHIP	UNIVERSITY CREDITS REQUIRING RECOGNITION

Siena, ____ / ____ / ____

SIGNATURE OF PROFESSOR IN CHARGE OF ERASMUS TRAINEESHIPS IN THE DEPARTMENT

STUDENT'S SIGNATURE

The Teaching Committee approves the training plan above on _____

CHAIRMAN'S SIGNATURE
