



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
