



UNIVERSITÀ  
DI SIENA  
1240

UFFICIO STUDENTI E DIDATTICA  
DIPARTIMENTO DI INGEGNERIA DELL'INFORMAZIONE E SCIENZE MATEMATICHE  
VIA ROMA, 56 – 53100 SIENA – TEL. 0577/234858 - 4859 FAX 0577/234857

**REQUEST FOR CHANGE OF STUDY PLAN**

IDENTIFICATION NUMBER \_\_\_\_\_

TO THE RECTOR

The undersigned \_\_\_\_\_  
(Tel. \_\_\_\_\_ cell. \_\_\_\_\_ e-mail \_\_\_\_\_)

student of the \_\_\_\_\_ year on course  repeating  out of course , in the  
bachelor degree  postgraduated degree  in \_\_\_\_\_

**WOULD LIKE TO CHANGE HIS/HER STUDY PLAN AS INDICATED BELOW**

INSERT		REMOVE		NOTES
COURSE TITLE	CFU	COURSE TITLE	CFU	

IN CASE OF A REQUEST FOR "FREE CREDITS", PLEASE INDICATE IN THE "NOTES" THE NAME OF THE PROGRAM IN WHICH THE COURSE IS DELIVERED AND ATTACH DETAILS OF THE COURSE PROGRAMME.

REASONS FOR THE STUDY PLAN CHANGE REQUEST (OPTIONAL)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IMPORTANT: PLEASE ATTACH CURRENT STUDY PLAN TO THIS REQUEST**

SIENA, \_\_\_\_\_ STUDENT \_\_\_\_\_

**RESERVED TO THE TEACHING COMMITTEE**

**APPROVED**  **NOT APPROVED**

**TEACHING COMMITTEE MEETING OF (date)** \_\_\_\_\_

THE STUDY PLAN HAS NOT BEEN APPROVED FOR THE FOLLOWING REASONS

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**COMMITTEE CHAIRMAN** \_\_\_\_\_

