



CORSO DI LAUREA MAGISTRALE IN ARCHITETTURA

codice B076 classe LM4, Curriculum in _Architectural Design

Scuola di Architettura

REQUEST FOR THE EQUIVALENCE OF THE DESIGN EXPERIENCE TO BE RECOGNISED AS STAGE CREDITS

marca da bollo 16,00€

ASK FOR

the recognition of 6 CFU (equal to at least 150 hours) for the design activity done at the studio

frequented from _____ to _____

Attaches: portfolio compiled by the student in A4 format in base of his activity done.

Date, _____ Signature (student) _____

Responsible of the host structure	
The undersigned	as the official representative of
the Design Studio	hereby declare that the student
	had a design experience as reported in the portfolio.
Sintetic profile of the Design Studio (competences, works done, other):	
Date, Stamp and Sig	nature

President of Master Degree in Architecture Course

Florence, _____

Signature _____





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SELF-CERTIFICATION OF KINSHIP AND PREREQUISITE EXAMS

I, the undersigned, ______ enroll number ______, able to provide a statement, in accordance with the D.P.R. n. 445/200, in order to request from today the beginning of the related procedures for the activation of the internship,

DECLARE

1. the internship will be carried out at _____

- where the owner is not a relative of the probationer

- where the owner is not the thesis' supervisor of the probationer

2. to have reached at least 36 course credits