

Study Plan – Advance Request

The Student: _____, _____ ID student _____,
Surname name

email _____, tel. _____

enrolled in the 1°-year A.Y. ____ / ____ in the "Master's Degree in Mechatronics Engineering", requests taking the following exams in advance.

Subjects to be advanced in the 1 st year	semester	Full name of the subject	SSD*	CFU
<input type="checkbox"/>				
<input type="checkbox"/>				

- Courses and credits of the semester:

Full name of the subject	semester	CFU
Total CFU		

- The last approved and signed study plan is attached (request for a copy to the Student Office of Engineering).

Specify a motivation for this request:

Date of request _____

Student

Approved **not approved**

Prof. Cristiano M. Verrelli
CS coordinator

Rome, _____