**SECOND CYCLE DEGREE PROGRAMME IN BIOMEDICAL ENGINEERING CLASS LM-21**

**A.A. 2025/2026**

ELECTIVE COURSE

**2° YEARS STUDENTS AND STUDENTS *ENROLLED* *PAST ENVISAGE COMPLETION TIME (Fuori corso)***

**To the Rector Of Alma Mater Studiorum Università di Bologna**

I, the undersigned student ID Born in province/country on Enrolled for the academic year 2024/2025 in the ° year of the Second Cycle Degree Programme in Biomedical Engineering

Hereby declare

The intention to choose Type D exams outside the list of teaching activities included in the Master’s Degree Study Programme.

The chosen activities need to be added in the spaces below, specifying the activity code, the name, the Degree Programme to which they belong, and the teaching location.

In case the student chooses the activity “15349 Curricular Internship” (6 CFU), additional fields need to be filled in. Please note that by adding a Curricular Internship as Type D activity, the student commits not to choose the same company, in the event that they also decide to undertake an internship as part of the final examination preparation (Type E activity). It is expected that the student had preliminarily contacted the company and a teacher affiliated with the Master Degree Program who agrees to act as a mentor for the internship.

The choices need to be approved by the Degree Programme Board, which will evaluate the consistency with the formative aims of the Degree Programme. If the student chooses a teaching activity belonging to a restricted-access Degree Programme, the approval of the specific Degree Programme Board will be required as well.

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| Code | Name | Degree Programme/Teaching location |
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Curricular Internship information (to be filled only if Curricular Internship is chosen)

* Name and Location of the external structure\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Name of the Academic Tutor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Short description (or list) of the scheduled activities\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Please note that contacts with the external structure need to be made *before* submitting the request.**

**CONTACT DETAILS:**

Street n°

C.A.P. City (Prov )

Telephone Cellphone

Cesena, Student’s signature

This form is available on the Degree Programme’s website (page: STUDYING > PREPARING THE STUDY PLAN) and needs to be sent via institutional e-mail to the Student Administration Office ([segcesena@unibo.it](mailto:segcesena@unibo.it)) in the following time-frames

**-I period**: from October 6th 2025 to November 7th 2025;

**-II period:** from February 9th 2026 to March 6th 2026.