Form for study plan submission: courses belonging to degree programmes with restricted access outside of the Engineering-Architecture field □

A.Y. 2026/27

To the Degree Programme Board of (1)

_____

To the Degree Programme Engineering _____

_____

_____ on the

Registration number _____
I the undersigned

born in _____

Phone n. _____

E-mail _____

Enrolled in the a.y. _____on the___year of the degree programme in _____of the

Engineering-Architecture field _____

REQUESTS

for the academic year **2026/27** to attend the following course unit(s), which belong(s) to the degree programme(s) with restricted access:

Degree programme code	Course unit code	Course unit title	CFU

Write the precise codes ot the Degree programme and Course.

Bologna, _____ _____

(Student's Signature)

(1) Write to which Degree Programme, with restricted access, the course to choose is related to.

PLEASE NOTE

This request will undergo evaluation by the Degree Programme Board of the course that the student selects and by the Degree Programme Board which the student is enrolled in.
The study plan will be revised just after the resolution of the competent office to the "EngineeringArchitecture" Student administration office.

RECEIPT FOR STUDY PLAN SUBMISSION/VARIATION A.Y. 2026/27

SURNAME AND NAME _____

REGISTRATION NUMBER _____

DEGREE PROGRAMME _____

Space for date stamp by the Student administration office