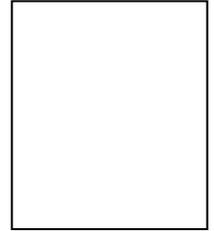




€ 16.00  
DUTY STAMP



**Individual study plan**  
**A.Y. 2020/2021**

Student ID n. \_\_\_\_\_

Surname and Name \_\_\_\_\_

Phone number: \_\_\_\_\_

**Enrolled for the A.Y. 2020/2021 in the following degree programme:**

Degree programme: \_\_\_\_\_

Code \_\_\_\_\_

Year \_\_\_\_\_

**Ask to change the study plana as below indicated:**

Code..... course .....ECTS .....

The reasons why I ask for an individual study plan are the following:

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Forlì, \_\_\_\_\_

\_\_\_\_\_  
(student's signature)