



UNIVERSITÀ
DEGLI STUDI
FIRENZE

**Scuola di
Architettura**

CORSO DI LAUREA
MAGISTRALE IN ARCHITETTURA
code B076 class LM4, Curriculum Architectural Design

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

Florence, _____

Signature _____