

TRANSCRIPT OF THESIS WORK
ACADEMIC YEAR: 20.../20...

<p>NAME OF SENDING INSTITUTION:</p> <p style="text-align: center;">UNIVERSITÀ DEGLI STUDI – L’AQUILA - ITALY</p>
<p>NAME OF STUDENT: First name:</p> <p>Date and place of birth:(sex): M/F</p> <p>Matriculation date: Matriculation number:</p> <p>E-MAIL ADDRESS:</p>
<p>NAME OF RECEIVING INSTITUTION:</p> <p>.....</p> <p>Faculty/Department of:</p> <p>Name of the Tutor:</p> <p>Tel: Fax: E-mail:</p>

I certify that the above mentioned student has carried out, from _____ to _____, the following activities for his/her thesis work under my supervision:

Date	Signature of the Tutor	Stamp of institution

NB : This document is not valid without the signature of the Tutor and the official stamp of the institution.