



## FORM FOR THE RECOGNITION OF EDUCATIONAL ACTIVITIES CARRIED OUT IN LIEU OF INTERNSHIP

(Art. 46 of Italian Presidential Decree of 28 December 2000, no. 445)

I, (surname/first name)

\_\_\_\_\_ Student Registration Number \_\_\_\_\_

Degree Programme / Master's Degree Programme in \_\_\_\_\_

\_\_\_\_\_ Born in (city, state) \_\_\_\_\_

Nationality \_\_\_\_\_ on \_\_\_\_\_ address \_\_\_\_\_

\_\_\_\_\_ tel. \_\_\_\_\_, e-mail \_\_\_\_\_

\_\_\_\_\_ tax code \_\_\_\_\_

### HERBY DECLARE

that I'm carrying out/ that I have carried out/participated  
in the following

**activity:** \_\_\_\_\_

Location(s) \_\_\_\_\_

If abroad: I declare that the activity was carried out in a country different from

the current address

Date: from \_\_\_\_\_ to \_\_\_\_\_

Hours: from \_\_\_\_\_ to: \_\_\_\_\_

Total amount of hours: \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

This declaration is made under my personal responsibility. I am aware of the criminal liability set forth for false declarations by Article 76 of Italian Presidential Decree 445/2000, the provisions of the Criminal Code, and special laws on the subject.

Ca' Foscari University of Venice (Dorsoduro 3246, Venice, [protocollo@pec.unive.it](mailto:protocollo@pec.unive.it)) will process the personal data provided in this form for the management thereof, for related institutional activities, and for verification. Data processing is here legally justified by the performance of a task in the public interest (Art. 6.1.e) GDPR). The data will be kept for as long as necessary while processing this declaration and performing any related activities. To learn more about the processing of your personal data and/or to exercise the rights granted by the legislation, contact the Data Protection Officer at [dpo@unive.it](mailto:dpo@unive.it).

### **Credit evaluation and recognition**

- **The internship contact person**
- **The Teaching Committee**

Having regard to the documents submitted:

**I recognise no. \_\_\_\_\_ ECTS/CFU for the activity carried out in lieu of an internship.**

Date \_\_\_\_\_ Signature \_\_\_\_\_