



To:
Attention:
Genova,

Subject: Endorsement for bachelor's/master's thesis research

Dear Prof./Dr./Mr./Ms. _____,
in the framework of the education and scientific collaboration our Institutions share, we
propose you to accept Mr./Ms. _____ for a _____ period,
starting on [day/month/year], at _____, in order
to undertake his/her bachelor's/master's thesis research.
He/she is enrolled on the bachelor/master course in _____.
The competent Board on _____ (dd/mm/yyyy), duly informed, appointed Prof. _____
as Supervisor for this thesis research. The title of the thesis
project will be _____, and during the
mobility period the thesis research will be aimed at _____.

Accordingly, the main tasks will be the following ones: _____.

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At the end of the mobility period, Mr./Ms. _____ has to submit a
written report to the University of Genoa on what he/she accomplished and what he/
she learned. The contents of this report, opportunely structured, will become part of
his/her bachelor's/master's thesis.

_____ designates
Prof./Dr./Mr./Ms. _____ as the student's advisor and he/she will be
requested to write a brief report stating the activities carried out during the activity period
and evaluating them.

On the basis of this evaluation the student will be given credit for his/her research work.
University of Genoa provides mobility students with an insurance coverage for civil liability
and accidents. The insurance policy states terms and conditions of the coverage. Students
must acquire, at their own expense, an additional insurance policy to be adequately
covered if/as requested by _____.

_____ undertakes all the obligations in compliance
to the applicable national legislation relative to safety and security in the workplace
towards students from University of Genoa.

It is understood that Mr./Ms. _____ will be not compensated for his/her
research work at the _____.

University of Genoa may decide to award financial contribution to the students involved
in bachelor's/master's thesis research, where specific financial funds are available.

For the University of Genoa
The thesis Supervisor, Prof.
Signature:

The Coordinator of the bachelor/master course, Prof.
Signature:

FOR ACCEPTANCE

The advisor, Prof./Dr./Mr./Ms.

Date, stamp and signature:

The Head of the Department/Office/Laboratory, Prof./Dr./Mr./Ms.

Date, stamp and signature: