

### REMOTE EXAMINATION REQUEST FORM

The undersigned \_\_\_\_\_,  
student number \_\_\_\_\_, enrolled in year \_\_\_\_\_ of the  
\_\_\_\_\_ Degree Course  
at the University of Milano-Bicocca, in relation to sitting the  
\_\_\_\_\_ exam in person,  
dated \_\_\_\_\_

#### REQUEST TO SIT THE EXAM REMOTELY BECAUSE

- I am resident abroad (*specify country of residence*) \_\_\_\_\_  
\_\_\_\_\_
- I am resident outside the Lombardy Region, including the provinces of Mantua and Sondrio  
(*specify place of residence*) \_\_\_\_\_  
\_\_\_\_\_
- I am unable to attend for reasons related to the COVID-19 health crisis

Date and Location \_\_\_\_\_

Signature

\_\_\_\_\_