***Anno Accademico*** **2016/2017**

**REGISTRO DELL’ATTIVITÀ DIDATTICA**

**Docente:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| Titolo del corso: |
|  |
| Corso: |
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| Corso di studio: |
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| Struttura didattica: |
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| N. ore: |

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|  | Ricevimento studenti | - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dalle \_\_\_\_\_\_\_ alle \_\_\_\_\_\_\_  - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dalle \_\_\_\_\_\_\_ alle \_\_\_\_\_\_\_ | | | | | |
|  | Sessioni esami |  | Estiva |  | Autunnale |  | Straordinaria |
|  | Diploma Supplement |  | | | | | |

Il presente Registro è composto di n. \_\_\_\_\_\_\_ pagine.

Firma del docente \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ferrara, lì\_\_\_\_\_\_\_\_\_\_\_\_ VISTO:

IL RESPONSABILE

DELLA STRUTTURA DIDATTICA

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| **ARGOMENTO TRATTATO** | **ARGOMENTO TRATTATO** |
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