

START OF ACTIVITY FORM  
MASTER'S THESIS A

The student \_\_\_\_\_ Matricola n. \_\_\_\_\_

E-mail: \_\_\_\_\_ Tel: \_\_\_\_\_

Master's degree in \_\_\_\_\_  
\_\_\_\_\_

INFORMS THAT:

he/she intends to perform its experimental activity at:

☐ laboratories of the Department of Biology (specify the location): \_\_\_\_\_  
\_\_\_\_\_

Thesis supervisor/s: \_\_\_\_\_

☐ laboratories of other departments of the university or one of the following research institutions:  
Scuola Normale Superiore, CNR, Scuola Superiore Sant'Anna (specify the location): \_\_\_\_\_  
\_\_\_\_\_

Thesis supervisor/s: \_\_\_\_\_

Tutor (if the supervisor does not hold a teaching position in the Department of Biology.): \_\_\_\_\_  
\_\_\_\_\_

☐ research institutions or companies located in Italy or abroad (specify the location): \_\_\_\_\_  
\_\_\_\_\_

Thesis supervisor/s (internal supervisor): \_\_\_\_\_

External thesis supervisor: \_\_\_\_\_

Date of start of activity: \_\_\_\_/\_\_\_\_/\_\_\_\_

\* It is necessary to obtain permission from the Department's Teaching Unit in order to start the experimental activity. The activity must be completed within 12 months from the date of authorization. Any extension request must be submitted by the thesis supervisor to the Unità didattica of the Department.



DIPARTIMENTO di BIOLOGIA



UNIVERSITÀ  
DI PISA

Thesis topic: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Insurance policies:

Accident insurance coverage for students is provided for the entire period of activities through the special "management on behalf of" form of the state (INAIL position No. 3140) supplemented by the following insurance coverage for civil liability and accidents:

- Accident Policy <https://www.unipi.it/index.php/amministrazione/item/4128-polizza-infortuni-a-favore-degli-studenti-e-dei-dipendenti>
- General Liability Policy <https://www.unipi.it/index.php/amministrazione/item/4123-polizza-di-responsabilita-civile-generale>

Signature of the supervisor/s (internal supervisor/s):

\_\_\_\_\_

Signature of the tutor (whether present):

\_\_\_\_\_

Signature of the external supervisor/s (whether present):

\_\_\_\_\_

The student declares to:

- abide by the disciplinary regulations, organizational rules for safety and hygiene at work;
- maintain the obligation of secrecy during and after the performance of the thesis with regard to products, production processes and any other activity or characteristic of the host company of which he/she becomes aware during the activities related to the performance of the thesis;
- request verification and authorization for any papers or reports to third parties;
- be aware that the request must be submitted for approval by the Graduate Council and that the thesis must be countersigned by the Supervisor.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Place: \_\_\_\_\_

Signature of the student: \_\_\_\_\_

To send to [tesi-bio@biologia.unipi.it](mailto:tesi-bio@biologia.unipi.it)