**LEARNING AGREEMENT**

**ACADEMIC YEAR 20.../20...**

|  |
| --- |
| Name of student: .............................................................................................................................................................  Sending institution:  Country: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Course title** | **Name of lecturer** | **Course type\*** | **ECTS** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
| Total | | | |  |

\* Choose one: tutorial, workshop, class, lecture, foreign language class

|  |
| --- |
| Student’s signature  .......................................................................................... Date: .......................................................... |

|  |
| --- |
| **SENDING INSTITUTION**  International Relations Office coordinator’s signature Dean’s signature  Date: Date:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **RECEIVING INSTITUTION**  International Relations Office coordinator’s signature Dean’s signature  Date: Date: |

**CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME/LEARNING AGREEMENT**

*(to be filled in ONLY if appropriate)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Course title** | **Deleted course unit** | **Added course unit** | **ECTS** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
| Total | | | |  |

|  |
| --- |
| Student’s signature  .......................................................................................... Date: .......................................................... |

|  |
| --- |
| **SENDING INSTITUTION**  International Relations Office coordinator’s signature Dean’s signature  Date: Date:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **RECEIVING INSTITUTION**  International Relations Office coordinator’s signature Dean’s signature  Date: Date: |