

**ECTS - EUROPEAN CREDIT TRANSFER AND ACCUMULATION SYSTEM
LEARNING AGREEMENT**

ACADEMIC YEAR: **STUDY PERIOD:** from to

FIELD OF STUDY:

Name of student:

Sending institution:

Country:

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/ LEARNING AGREEMENT

Receiving institution:

Country:

Course unit code (if any) and page no. of the course catalogue	Course unit title <i>(as indicated in the course catalogue)</i>	Number of ECTS credits
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> If necessary, continue the list on a separate sheet
 > Fair translation of grades must be ensured and the student has been informed about the methodology

Date Student's signature

**ECTS - EUROPEAN CREDIT TRANSFER AND ACCUMULATION SYSTEM
LEARNING AGREEMENT**

SENDING INSTITUTION

We confirm that the proposed programme of study/learning agreement is approved.

Departmental coordinator's signature

Institutional coordinator's signature

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.....

Date:

Date:

RECEIVING INSTITUTION

We confirm that the proposed programme of study/learning agreement is approved.

Departmental coordinator's signature

Institutional coordinator's signature

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Date:

Date:

CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME/ LEARNING AGREEMENT

(to be filled in **only** if appropriate)

Course unit code (if any) and page no. of the course catalogue	Course unit title (as indicated in the course catalogue)	Deleted course unit	Added course unit	Number of ECTS credits
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> If necessary, continue this list on a separate sheet

Date Student's signature

SENDING INSTITUTION
We confirm that the proposed programme of study/learning agreement is approved.
Departmental coordinator's signature Institutional coordinator's signature
Date: Date:

RECEIVING INSTITUTION
We confirm that the proposed programme of study/learning agreement is approved.
Departmental coordinator's signature Institutional coordinator's signature
Date: Date: