**LEARNING AGREEMENT FOR THE 2020 - 2021 ACADEMIC YEAR**

|  |  |
| --- | --- |
| **Name of Student** |  |
| **Name of Home University** |  |
| **Country** |  |

**Planned period of the mobility**: **from** [month/year]………………. **until** [month/year] …………………

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| **Component / Course Code** | **Component title (as indicated in the course catalogue) at the receiving institution** | **Number of Credits** |
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| **TOTAL number of ECTS credits** | |  |

|  |  |
| --- | --- |
| **Student Signature:** | **Date:** |

**SENDING INSTITUITON**

|  |  |
| --- | --- |
| We confirm that this proposed programme of study / learning agreement is approved. | |
| **Departmental coordinator’s signature**  First name: ……………………………………………..  Last name:………………………………………………  Signature:  Stamp: | **Institutional coordinator’s signature**  First name:……………………………………………..  Last name:……………………………………………...  Signature:  Stamp: |
| E-mail: | E-mail: |
| Date: | Date: |

**RECEIVING INSTITUTION**

|  |  |
| --- | --- |
| We confirm that this proposed programme of study / learning agreement is approved. | |
| **Departmental coordinator’s signature**  Senior Lecturer / Associate professor / Professor  Signature: | **Institutional coordinator’s signature**  Senior Lecturer / Associate professor / Professor  Signature:  Stamp: |
| Date: | Date: |