# LLP-ERASMUS STUDENT MOBILITY
# LEARNING AGREEMENT

## ACADEMIC YEAR 20 _ _ /20 _ _ - FIELD OF STUDY: .....

Name of student: .....

Sending institution, Faculty:

..... Country: .....

**DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT**

Receiving institution, Department:

..... Country: .....

| Course unit code (if any) | Course unit title | Number of credits (hours) |
|---|---|---|
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if necessary, continue the list on a separate sheet

Student's signature

..... Date: .....

**SENDING INSTITUTION**

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

Tutor's signature — Dean's signature

..... .....

Date: ..... Date: .....

**RECEIVING INSTITUTION**

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

Tutor's signature — Dean's signature

..... .....

Date: ..... Date: .....

Name of student: .....

Sending institution, Faculty:

..... Country: .....

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

(to be filled in ONLY if appropriate)

| Course unit code (if any) | Course unit title | Deleted course unit | Added course unit | Number of credits (hours) |
|---|---|---|---|---|
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if necessary, continue this list on a separate sheet

Student's signature

..... Date: .....

**SENDING INSTITUTION**

We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.

Tutor's signature — Dean's signature

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Date: ..... Date: .....

**RECEIVING INSTITUTION, Department**

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.We confirm bye the above-listed changes to the initially agreed programme of study/learning agreement are approved.

Tutor's signature — Dean's signature

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Date: ..... Date: .....