

Study Exchange Learning Agreement – Academic Year 2013/14

Please complete electronically.

Name of Student:	
Sending Institution:	Field of Study:
Erasmus ID Code:	Country:
Receiving Institution: University of Surrey	Erasmus ID Code: UK GUILDFO 01

Details of the Proposed Study Programme

Project Title/Description	Surrey Supervisor	Number of ECTS Credits

Student's signature:	Date:
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Sending Institution	
We confirm that the proposed study programme will meet the credit transfer regulations in our institution and the student has been informed about the credit/grade transfer arrangements.	
Departmental Exchange Coordinator's signature: Date:	Institutional Exchange Coordinator's signature and stamp: Date:

Receiving Institution (Surrey)	
We confirm that the proposed study programme is approved.	
Departmental Exchange Coordinator's signature: Date:	Institutional Exchange Coordinator's signature and stamp: Date:

Please return by email AND post to:

Email: z.stevenson@surrey.ac.uk

Mrs Zoe Stevenson, Incoming Exchanges Administrator, International Relations Office – B3, Senate House, University of Surrey, Guildford, Surrey GU2 7XH, United Kingdom