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

**ACADEMIC YEAR 20..../20.... - FIELD OF STUDY: ......** 

Name of students						
Name of student:						
Sending institution:						
		Country:				
DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT						
Receiving institution:						
		Country				
	•••••	Country				
Course unit code (if any) and page no. of the information package		tle (as indicated in the ation package)	Number of ECTS credits			
if necessary, continue the	list on a separate sl	neet				
Student's signature						
Student's signature						
Date:						
SENDING INSTITUTION						
We confirm that the proposed programme of study/learning agreement is approved.						
Departmental coordinator's signature						
Date: Date:						
RECEIVING INSTITUTION						
We confirm that this proposed programme of study/learning agreement is approved.						
Departmental coordinator's signature  Institutional coordinator's signature						
Date: Date:						
240	•••••					

Name of student:					
Sending institution:					
		ountry:			
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 information package	Course unit title (as indicated in the information package)	Deleted course unit	Added course unit	Number of ECTS credits	
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if necessary, co	ontinue this list on a separate sheet			1	
Student's signature					
	Date	:			
SENDING INSTITUTIO	N				
We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.					
Departmental coordinator's signature  Institutional coordinator's signature					
Date:					

RECEIVING INSTITUTION				
We confirm bye the above-listed changes to the initially agreed programme of study/learning agreement are approved.				
Departmental coordinator's signature	Institutional coordinator's signature			
Date:	Date:			