

SORBONNE LAW SCHOOL/PARIS I PANTHEON-SORBONNE

LEARNING AGREEMENT

ACADEMIC YEAR: 20.../20...

STUDY PERIOD: from..... to.....

FIELD OF STUDY: LAW

Name of student:
Student's e-mail address:.....
Sending Institution: Country:USA.....

DETAILS OF THE STUDY PROGRAMME ABROAD/LEARNING AGREEMENT

Receiving institution:SORBONNE LAW SCHOOL..... Country: France...
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SEMESTER 1 Course unit code (if any) package	Course unit title (as indicated in the course catalogue)	Number of ECTS credits
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SEMESTER II Course unit code (if any) package	Course unit title (as indicated in the course catalogue)	Number of ECTS credits
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Student's signature	Date:
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SENDING INSTITUTION: We confirm that the learning agreement is accepted. Signature of the coordinator of the Program	Date:
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RECEIVING INSTITUTION : PARIS I PANTHEON-SORBONNE Signature of the coordinator of the Program	Date:
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