



## Learning agreement for studies

	Last name(s)	First names(s)	Date of birth	Nationality	Sex (M/F/X)
<b>Student</b>					
	Name	Faculty/ Department	Address/Country	Contact person name, email, phone	
<b>Sending Institution</b>					
	Name	Faculty/ Department	Address/Country	Contact person name, email, phone	
<b>Receiving Institution</b>					

Planned period of the mobility	From (month/year):		To (month/year):	
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<b>Receiving Institution</b>	Study course at host university:	Number of ECTS to be awarded upon successful completion	<b>Sending Institution</b>	Study course at home university:	Number of ECTS (or equivalent) to be recognized by the sending institution
Component code (if any)	Component title		Component code (if any)	Component title	
Total			Total		

### Commitment:

By signing this document, the student, the sending institution and the receiving institution confirm that they will comply with all the arrangements agreed by all parties. The receiving institution confirms that the educational components should be available to the student. The sending institution commits to recognize all the credits gained at the receiving institution for the successfully completed educational components and to count them towards the student's degree. The student and the receiving institution will communicate to the sending institution any problems or changes regarding the study program.

Commitment	Name	Position	Date	Signature
Student		Student		
Responsible person at the sending institution				
Responsible person at the receiving institution				