### University Exchange Programme (Hochschulaustausch)

**LEARNING AGREEMENT**

Academic Year \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

**Study period:** from ……….. to …………… Field of study: .........................……….

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| Name of student: **.........................................................................................................................................**  Sending institution: **University of Greifswald** Country: **Germany** |
| **DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT** |
| Receiving institution: ……………………………………………………. Country: ………………………… |

Study Programme at the receiving institution

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| **Course unit code** | **Course unit title (as indicated in the course catalogue)** | **Number of ECTS** |
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|  | if necessary, continue the list on a separate sheet | **Total:** |

Recognition at the sending institution

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| **Course unit code** | **Course unit title (as indicated in the course catalogue)** | **Number of ECTS** |
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|  | if necessary, continue the list on a separate sheet | **Total:** |

SIGNATURES

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| **Student’s signature**: …......................................................................... Date: ..................................... |
| **SENDING INSTITUTION**  We confirm that the proposed programme of study/learning agreement is approved.  Date: ...................................................  Place: ………………………………………  Departmental coordinator’s signature: |
| **RECEIVING INSTITUTION**  We confirm that this proposed programme of study/learning agreement is approved.  Date: ........................................  Place: ………………………………  Departmental coordinator’s signature: |

\* The student keeps the document with the original signatures, the sending and receiving institutions have to keep a copy or a scan.

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| **CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME/LEARNING AGREEMENT**  (To be filled in ONLY if appropriate) |
| Name of student: **........................................................**  Sending institution: **University of Greifswald** Country: **Germany** |

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| **Course unit code** | **Course unit title (as indicated in the course catalogue)** | **Deleted**  **course**  **unit** | **Added**  **course**  **unit** | **Number of ECTS** |
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|  | if necessary, continue the list on a separate sheet |  |  | **Total:** |

Recognition at the sending institution

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| --- | --- | --- |
| **Course unit code** | **Course unit title (as indicated in the course catalogue)** | **Number of ECTS** |
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|  | if necessary, continue the list on a separate sheet | **Total:** |

SIGNATURES

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| --- |
| **Student’s signature**: …......................................................................... Date: ..................................... |
| **SENDING INSTITUTION**  We confirm that the proposed programme of study/learning agreement is approved.  Date: ...................................................  Place: ………………………………………  Departmental coordinator’s signature: |
| **RECEIVING INSTITUTION**  We confirm that this proposed programme of study/learning agreement is approved.  Date: ........................................  Place: ………………………………  Departmental coordinator’s signature: |