**Learning Agreement**

**Student Mobility for Studies**

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| **Student** | **Last name(s)** | **First name(s)** | **Date of birth** | | **Nationality**i | | **Sex [M/F]** | | **Study cycle**ii | | | | **Field of education** iii | | |
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| **Sending Institution** | **Name** | **Faculty/Department** | | | **Address** | | **Country** | | **Contact person name**iv**; email; phone** | | | | | | |
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| **Receiving Institution** | **Name** | **Faculty/ Department** | | | **Address** | | **Country** | | **Contact person name; email; phone** | | | | | | |
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| **Before the mobility** | | | | | | | | | | | | | | | |
|  | ***Study Programme at the Receiving Institution***   **Planned period of the mobility: from [day/month/year] ……………. to [day/month/year] ……………** | | | | | | | | | | | | | | |
| **Table A**  **Before the mobility** | **Component**v **code**  (if any) | **Component title at the Receiving Institution**  (as indicated in the course cataloguevi) | | | | | | **Semester**   [e.g. autumn/spring; term] | | | **Number of ECTS credits (or equivalent)**vii **to be awarded by the Receiving Institution upon successful completion** | | | | |
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| Web link to the course catalogue at the Receiving Institution describing the learning outcomes: [*web link to the relevant information*] | | | | | | | | | | | | | | | |
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| The level of language competenceviii  in \_\_\_\_\_\_\_\_ [*indicate here the main language of instruction*] that the student already has or agrees to acquire by the start of the study period is: *A1* ☐*A2* ☐*B1* ☐*B2* ☐*C1* ☐*C2* ☐*Native speaker* ☐ | | | | | | | | | | | | | | | |  |

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|  | ***Recognition at the Sending Institution*** | | | | | | | | | | | | | | |
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| **Table B**  **Before the mobility** | **Component code**  (if any) | | **Component title at the Sending Institution**  (as indicated in the course catalogue) | | | | | | **Semester**   [e.g. autumn/spring; term] | | | **Number of ECTS credits (or equivalent) to be recognised by the Sending Institution** | | | |
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| Provisions applying if the student does not complete successfully some educational components: *[web link to the relevant information]* | | | | | | | | | | | | | | | |
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| ***Commitment***  By signing this document, the student, the Sending Institution and the Receiving Institution confirm that they approve the Learning Agreement and that they will comply with all the arrangements agreed by all parties. The Receiving Institution confirms that the educational components listed in Table A are in line with its course catalogue and should be available to the student. The Sending Institution commits to recognise all the credits or equivalent units gained at the Receiving Institution for the successfully completed educational components and to count them towards the student's degree as described in Table B. Any exceptions to this rule are documented in an annex of this Learning Agreement and agreed by all parties. The student and the Receiving Institution will communicate to the Sending Institution any problems or changes regarding the study programme, responsible persons and/or study period. | | | | | | | | | | | | | | | |
| **Commitment** | | **Name** | | | **Email** | | | **Position** | | | **Date** | | | **Signature** | |
| Student | |  | | |  | | | *Student* | | |  | | |  | |
| Responsible personix at theSending Institution | |  | | |  | | |  | | |  | | |  | |
| Responsible person at theReceiving Institutionx | |  | | |  | | |  | | |  | | |  | |

**During the Mobility**

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|  | **Exceptional changes to Table A**  (to be approved by e-mail or signature by the student, the responsible person in the Sending Institution and the responsible person in the Receiving Institution) | | | | | |
| **Table A2**  **During the mobility** | **Component code**   (if any) | **Component title at the** **Receiving Institution**  (as indicated in the course catalogue) | **Deleted component**  [tick if applicable] | **Added component**  [tick if applicable] | **Reason for changexi** | **Number of ECTS  credits (or equivalent)** |
|  |  |  | ☒ | ☐ | Choose an item. |  |
|  |  |  | ☐ | ☒ | Choose an item. |  |
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|  | | **Exceptional changes to Table B (if applicable)**  (to be approved by e-mail or signature by the student and the responsible person in the Sending Institution) | | | | | | | | | | | | | | | | |
| **Table B2**  **During the mobility** | | **Component code**   (if any) | | | **Component title at the** **Sending Institution**  (as indicated in the course catalogue) | | | | **Deleted component**  [tick if applicable] | | | **Added component**  [tick if applicable] | | | | **Number of ECTS credits (or equivalent)** | | |
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| ***Commitment***  By signing this document, the student, the Sending Institution and the Receiving Institution confirm that they approve the Learning Agreement and that they will comply with all the arrangements agreed by all parties. The Receiving Institution confirms that the educational components listed in Table A are in line with its course catalogue and should be available to the student. The Sending Institution commits to recognise all the credits or equivalent units gained at the Receiving Institution for the successfully completed educational components and to count them towards the student's degree as described in Table B. Any exceptions to this rule are documented in an annex of this Learning Agreement and agreed by all parties. The student and the Receiving Institution will communicate to the Sending Institution any problems or changes regarding the study programme, responsible persons and/or study period. | | | | | | | | | | | | | | | | | | | | |
| **Commitment** | | | | **Name** | | | | **Email** | | | | **Position** | | | **Date** | | | **Signature** | | |
| Student | | | |  | | | |  | | | | *Student* | | |  | | |  | | |
| Responsible personxii at theSending Institution | | | |  | | | |  | | | |  | | |  | | |  | | |
| Responsible person at theReceiving Institutionxiii | | | |  | | | |  | | | |  | | |  | | |  | | |

**After the Mobility**

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|  | | ***Transcript of Records at the Receiving Institution***  **Start and end dates of the study period: from [day/month/year] ……………. to [day/month/year] …………….** | | | | | | | | | | | | | | | | | | | | | | | |
| **Table C**  **After the mobility** | | **Component code**   (if any) | | | **Component title at the Receiving Institution**  (as indicated in the course catalogue) | | | | | | **Was the component successfully completed by the student?** [Yes/No] | | | | | | | | **Number of ECTS credits**   (or equivalent) | | | **Grades received at the Receiving Institution** | | | |
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|  | | ***Transcript of Records and Recognition at the Sending Institution***   **Start and end dates of the study period: from [day/month/year] ……………. to [day/month/year] …………….** | | | | | | | | | | | | | | | | | | | | | | | |
| **Table D**  **After the mobility** | | **Component code**   (if any) | | | **Title of recognised component** **at the Sending Institution**  (as indicated in the course catalogue) | | | | | | | | | | | **Number of ECTS credits** (or equivalent)**recognised** | | | | | **Grades registered at the Sending Institution**   (if applicable) | | | | |
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| ***Commitment***  By signing this document, the student, the Sending Institution and the Receiving Institution confirm that they approve the Learning Agreement and that they will comply with all the arrangements agreed by all parties.  The Receiving Institution confirms that the educational components listed in Table A are in line with its course catalogue and should be available to the student. The Sending Institution commits to recognise all the credits or equivalent units gained at the Receiving Institution for the successfully completed educational components and to count them towards the student's degree as described in Table B. Any exceptions to this rule are documented in an annex of this Learning Agreement and agreed by all parties. The student and the Receiving Institution will communicate to the Sending Institution any problems or changes regarding the study programme, responsible persons and/or study period. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Commitment** | | | | **Name** | | | | | **Email** | | | | | **Position** | | | | **Date** | | | **Signature** | | | | | |
| Student | | | |  | | | | |  | | | | | *Student* | | | |  | | |  | | | | | |
| Responsible personxiv at theSending Institution | | | |  | | | | |  | | | | |  | | | |  | | |  | | | | | |
| Responsible person at theReceiving Institutionxv | | | |  | | | | |  | | | | |  | | | |  | | |  | | | | | |