

Erasmus Subject Area Code:

ACADEMIC YEAR:

Name of student:



ECTS - EUROPEAN CREDIT TRANSFER AND ACCUMULATION SYSTEM LEARNING AGREEMENT

-	·	olent University, UK - Code					
Course unit code (if any)	Course unit title (as indic	ated in the information package)	Number of ECTS credits	Duration of Unit *			
Supplementary Studies (Units taken in addition to the required 60 ECTS)							
	y, continue the list on a sep full year unit.	oarate sheet					
Student's signature:		Date:	Date:				
ENDING INSTITUTI	ON						
e confirm that the	e proposed programme of	study/learning agreement is ap	oproved.				
epartmental coordinator's signature		Institutional coordinator's	Institutional coordinator's signature				
•••••	•••••		• • • • • • • • • • • • • • • • • • • •	•••••			
ate:		Date:	Date:				
ECEIVING INSTITU	TION						
e confirm that thi	s proposed programme o	f study/learning agreement is a	pproved.				
epartmental coordinator's signature		Institutional coordinator's	Institutional coordinator's signature				
ate:		Date:	Date:				

CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME/LEARNING AGREEMENT (to be completed ONLY if appropriate)

`	, -ppp,					
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	Duration of Unit	
If necessary, continue this list on a separate sheet						
Student's signature:			Date:			

Date	Date			
RECEIVING INSTITUTION				
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	Date			

We confirm that the above-listed changes to the initially agreed programme of study/learning agreement

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Institutional coordinator's signature

SENDING INSTITUTION

Departmental coordinator's signature

are approved.