

Learning Agreement for Exchange Students from Partner Universities



1. The Student

Last name:		First/Given name:	
Date of birth:		Nationality:	
Sex [M/F]:		E-mail address:	
University/college (sending inst.):			
Study program (including degree, e.g. Bachelor, Master):		Completed semesters:	

2. Responsible Academic at the Sending Institution

Title and full name		Academic institution and function:	
Phone number:		E-mail address:	

3. Responsible Academic at the Receiving Institution

Title and full name		Academic institution and function:	
Phone number:		E-mail address:	

4. Study Plan for Winter Semester

Summer Semester

Component title as indicated in the course catalogue at the receiving institution or title of proposed scientific work	Number of ECTS credit points to be awarded by the receiving institution upon successful completion

	Total:

By signing, the sending institution and the receiving institution confirm that they approve the study plan above. The receiving institution confirms that the listed educational components are in line with its course catalogue.

The sending institution commits to recognise 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 receiving institution will communicate to the sending institution any changes of the study plan, responsible persons and/or study period.

Place, date:

signature of the responsible person at the sending institution (academic):

Place, date:

signature of the responsible person at the receiving institution (academic):

5. Changes to the original study plan

The following table only needs to be completed and signed if changes need to be made to the study plan after admission.

Component title as indicated in the course catalogue at the receiving institution	Deleted component	Added component	Number of ECTS credit points
			Total:

Changes can only be made within four weeks after arrival at the receiving institution.

Place, date:

signature of the responsible person at the sending institution (academic):

Place, date:

signature of the responsible person at the receiving institution (academic):
