

LEARNING AGREEMENT

FOR ACADEMI	C YEAR 20	20	FIELD OF STUDY	
Name of Student				

Sending Institution

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Country

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT

Receiving Institution		Country	
Course code (if any) and page no. the information package/study gui	f Course title (as indicated in the information package/stu	dy guide)	Number of ECTS credits (and/or Finnish/other credits)

if necessary, continue the list on a separate sheet

Date	Student's signature
SENDING INS	TITUTION We confirm that the proposed programme of study/learning agreement is approved.
Date	Departmental coordinator's signature
Date	Institutional co-ordinator's signature
RECEIVING I	NSTITUTION We confirm that this proposed programme of study/learning agreement is approved.
Date	Departmental coordinator's signature
Date	Institutional co-ordinator's signature

Name of Student		
Sending Institution	Country	

CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME / LEARNING AGREEMENT

(to be filled ONLY if appropriate)

Course code (if any) and page no. of the information package/study guide	Course title (as indicated in the information package/study guide)	Deleted course unit	Added course unit	Number of ECTS credits (and/or Finnish/other credits)
	if noncommunity the list on a compute sheet			

if necessary, continue the list on a separate sheet

Date

Student's signature

SENDING INSTITUTION

We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.
Date Departmental coordinator's signature Date Institutional co-ordinator's signature

RECEIVING INSTITUTION

We confirm bye the above-listed changes to the initially agreed programme of study/learning agreement are approved.				
Date	Departmental coordinator's signature			
Date	Institutional co-ordinator's signature			
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