|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Student**  | **Last name(s)** | **First name(s)** | **Date of birth** | **Nationality** |  **Gender [Male/Female/Undefined]** | **Study Programme at UW/H** |
|  |  |  |  |  |  |
| **Sending Institution** | **Name** | **Faculty/Department** | **Country** | **Address** | **Contact person name; email; phone** |
|  |  |  |  |  |
| **Receiving Institution**  | **Name** | **Faculty/ Department** | **Country** | **Address** | **Contact person name; email; phone** |
|  |  |  |  |  |
| **Before the mobility** |
|  | ***Study Programme at the Receiving Institution*****Planned period of the mobility: from [month/year] ……………. to [month/year] ……………** |
| **Table A****Before the mobility** | **Module****code**(if any) | **Module title at the Receiving Institution**(as indicated in the course catalogue) | **Semester**  | **Number of ECTS credits (or equivalent) to be awarded by the Receiving Institution upon successful completion** |
|   |   |  |  |  |
|   |   |  |  |  |
|   |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|   |  |  |  | **Total: …** |
| Web link to the course catalogue at the Receiving Institution describing the learning outcomes: [*web link to the relevant information*] |
|  |  |  |  |  |  |  |  |  |
| The level of language competence 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* [ ]  |

**Learning Agreement**

**Student Mobility for Studies**

|  |  |
| --- | --- |
|   | ***Recognition at the Sending Institution*** |
| **Table B****Before the mobility** | **Module code** (if any) | **Module title at the Sending Institution**(as indicated in the course catalogue) | **Semester**  | **Number of ECTS credits (or equivalent) to be recognised by the Sending Institution** |
|   |   |  |  |  |
|   |   |  |  |  |
|   |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |
|   |  |  |  | **Total: …** |
|  |  |  |  |  |  |  |  |  |
| ***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.  |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Student |  |  | *Student* |  |  |
| Responsible person at theSending Institution |  |  |  |  |  |
| Responsible person at theReceiving Institution |  |  |  |  |  |

**During the Mobility**

|  |  |
| --- | --- |
|   | **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** | **Module code** (if any) | **Module title at the** **Receiving Institution**(as indicated in the course catalogue)  | **Deleted module**[tick if applicable] | **Added module**[tick if applicable] | **Reason for change** | **Number of ECTS credits (or equivalent)** |
|   |   |  | [ ]  | [ ]  | Choose an item. |  |
|   |   |  | [ ]  | [ ]  | Choose an item. |  |

|  |  |
| --- | --- |
|   | **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** | **Module code** (if any) | **Module title at the** **Sending Institution**(as indicated in the course catalogue)  | **Deleted module**[tick if applicable] | **Added module**[tick if applicable] | **Number of ECTS credits (or equivalent)** |
|   |   |  | [ ]  | [ ]  |  |
|   |   |  | [ ]  | [ ]  |  |

|  |
| --- |
| ***Commitment*** By signing this document, the student, the Sending Institution and the Receiving Institution confirm that they approve the changes to the Learning Agreement. |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Student |  |  | *Student* |  |  |
| Responsible person at theSending Institution |  |  |  |  |  |
| Responsible person at theReceiving Institution |  |  |  |  |  |