





Name of student:

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

Table with 7 columns: Course code, Course title, Deleted Course Unit, Added Course Unit, ECTS credits, Duration of the course (Number of hours, Beginning Date/Ending Date). Includes checkboxes for Deleted and Added units.

If necessary, please continue the list on a separate sheet

Student's signature: Date:

SENDING INSTITUTION

We confirm that the proposed programme of study/learning agreement is approved.

Departmental coordinator's signature: Institutional coordinator's: signature

Date: Date:

RECEIVING INSTITUTION

We confirm that the proposed programme of study/learning agreement is approved.

Departmental coordinator's signature: Institutional coordinator's signature:

Date: Date: