

.....
Date:..... Date:.....

Name of student:
Sending institution:
Country:

CHANGES TO THE ORIGINAL PROPOSED STUDY PROGRAMME / LEARNING AGREEMENT
(tobefilled **ONLY** if appropriate)

Course unit code (if any)	Course unit title (as indicated in the information package)	Deleted course unit	Added course unit	Number of credits ECTS, Others*:
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

*please indicate type of credits

If necessary, continue this list on a separate sheet

Student's signature
..... Date:.....

SENDING INSTITUTION

We hereby confirm 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:.....

RECEIVING INSTITUTION

We hereby confirm 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:.....