



**AMERICANOS
COLLEGE**

ECTS – EUROPEAN CREDIT TRANSFER AND ACCUMULATION SYSTEM

LEARNING AGREEMENT

ACADEMIC YEAR: 20..... / 20.....
SEMESTER:
FIELD OF STUDY:

Name of student (SURNAME first):
Sending institution: Country:

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT

Receiving institution:
Country:

Course unit code	Course unit title	Number of ECTS credits
.....
.....
.....
.....
.....

* if necessary 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 this proposed programme of study/learning agreement is approved.

Departmental coordinator's signature

Institutional coordinator's signature

.....

.....

Date:

Date:

Name of student:

Sending Institution: Country:

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

Course unit code	Course unit title	Deleted course unit	Added course unit	Number of ECTS credits
.....
.....
.....
.....

* if necessary continue the list on a separate sheet

Student's signature

Date:

SENDING INSTITUTION

We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.

Departmental coordinator's signature

Institutional coordinator's signature

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Date:

Date:

RECEIVING INSTITUTION

We confirm by the above-listed changes to the initially agreed programme of study/learning agreement are approved.

Departmental coordinator's signature

Institutional coordinator's signature

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Date:

Date: