

**LEARNING AGREEMENT - ACADEMIC YEAR 20\_\_/20\_\_**

**FIELD OF STUDY:**

**Name of student:**  
**Sending institution:** Rheinische Friedrich-Wilhelms-Universität Bonn  
**Country:** Germany

**DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT**

**Receiving institution:**  
**Country:**

Course unit code (if any) and page no. of the information package	Course unit title (as indicated in the information package)	Semester (autumn/spring)	Number of (ECTS) credits	Replaces the following module/course at the University of Bonn

If necessary, continue the list on a separate sheet

Student's signature: \_\_\_\_\_

Place, Date

**SENDING INSTITUTION**

We confirm that the proposed programme of study is approved.

signature

Date, Place:

\_\_\_\_\_

**examination office or professor**

***Hinweis:** Die Unterschrift der Gasthochschule ist nicht obligatorisch, wenn das Studienprogramm bereits mit der Gasthochschule in anderer Form abgeklärt wurde.*

**RECEIVING INSTITUTION**

We confirm that this proposed programme of study is approved.

Date, Place:

Name, Position

\_\_\_\_\_

Signature

**CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME** (to be filled in ONLY if appropriate)

**Name of student:**

<b>Course unit code (if any) and page no. of the information package</b>	<b>Course unit title (as indicated in the information package)</b>	<b>Semester (autumn/spring)</b>	<b>Number of (ECTS) credits</b>	<b>Replaces the following module/course at the University of Bonn</b>

Student's signature: \_\_\_\_\_ Place, Date: \_\_\_\_\_

**SENDING INSTITUTION**  
I confirm that the above-listed changes to the initially agreed programme of study are approved.  
\_\_\_\_\_  
examination office or professor

Date, Place: \_\_\_\_\_

**Falls erforderlich:**

**RECEIVING INSTITUTION**  
I confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.  
\_\_\_\_\_  
Name, Position

Date, Place: \_\_\_\_\_

\_\_\_\_\_  
(signature)

