**EUROPEAN CREDIT TRANSFER AND ACCUMULATION SYSTEM (ECTS)**

**LEARNING AGREEMENT - ACADEMIC YEAR 2023/2024**

|  |
| --- |
| Student’s family name: First name: Sending institution: Radboud University, Nijmegen, The Netherlands |

# DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD

|  |
| --- |
| Name receiving institution: City & Country: Field of study at receiving institution: Period of study: from: \_\_\_\_\_\_ *(day)* / \_\_\_\_\_\_ *(month)* / \_\_\_\_\_\_*(year)*to: \_\_\_\_\_\_ *(day)* / \_\_\_\_\_\_ *(month)* / \_\_\_\_\_\_*(year)* Number of months:  |

|  |  |  |  |
| --- | --- | --- | --- |
| Course code          | Course title           | Level of the course(BA or MA)          | Number of ECTS credits[[1]](#footnote-1)          |
|  |

*If necessary, continue this list on a separate sheet*

|  |
| --- |
| Student’s signature: Date:  |

|  |
| --- |
| **SENDING INSTITUTION: RADBOUD UNIVERSITY**We confirm that the proposed programme of study/learning agreement is approved.Examination Board’s signature: Date:  |

|  |
| --- |
| **RECEIVING INSTITUTION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**We confirm that the proposed programme of study/learning agreement is approved. Departmental coordinator’s signature  Date:  |

**CHANGE FORM LEARNING AGREEMENT - ACADEMIC YEAR 2023/2024**

|  |
| --- |
| Student’s family name: First name: Sending institution: Radboud University, Nijmegen, The Netherlands |

# DETAILS OF THE RECEIVING INSTITUTION

|  |
| --- |
| Name receiving institution: City & Country: Field of study at receiving institution:  |

# CHANGES TO THE ORIGINAL PROPOSED STUDY PROGRAMME ABROAD

*To be filled in only if applicable*

|  |  |  |  |
| --- | --- | --- | --- |
| Course code         | Course title          |  Delete Add this this course course 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 🞏 | Number of ECTS credits[[2]](#endnote-1)         |

*If necessary, continue this list on a separate sheet*

# CHANGES TO THE ORIGINAL PERIOD OF STUDY ABROAD

*To be filled in only if applicable*

|  |
| --- |
| **Original** period of study: **New** period of study:from: \_\_\_\_\_\_ *(day)* / \_\_\_\_\_\_ *(month)* / \_\_\_\_\_\_ *(year)* from: \_\_\_\_\_\_ *(day)* / \_\_\_\_\_\_ *(month)* / \_\_\_\_\_\_ *(year)*to: \_\_\_\_\_\_ *(day)* / \_\_\_\_\_\_ *(month)* / \_\_\_\_\_\_ *(year)* to: \_\_\_\_\_\_ *(day)* / \_\_\_\_\_\_ *(month)* / \_\_\_\_\_\_ *(year)* |

|  |
| --- |
| Student’s signature: Date:  |

|  |
| --- |
| **SENDING INSTITUTION: RADBOUD UNIVERSITY**We confirm that the proposed programme of study/learning agreement is approved.Examination Board’s signature: Date:  |

|  |
| --- |
| **RECEIVING INSTITUTION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**We confirm that the proposed programme of study/learning agreement is approved.Departmental coordinator’s signature  Date:  |

1. The Examination Board will confirm the conversion of foreign credits to ECTS credits only once the student submits the foreign Transcript of Records after the stay abroad [↑](#footnote-ref-1)
2. The Examination Board will confirm the conversion of foreign credits to ECTS credits only once the student submits the foreign Transcript of Records after the stay abroad [↑](#endnote-ref-1)