LEARNING AGREEMENT FOR STUDIES
FOR NON ERASMUS STUDENTS
ACADEMIC YEAR 20.. / 20..

Student’s family name: ___________________________  First name: _____________________________________
E-mail address:____________________________________________________________________________________
Name sending institution (in local language):____________________________________________________________________
University code (if known): ___________________________  City & country: ___________________________________

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD

Receiving institution:  Radboud Universiteit Nijmegen
University code:  NL NIJMEGE01  City & country:  Nijmegen, The Netherlands
Field of study at receiving institution:  Faculty of Arts
Period of study:
from:  ______ (day) / ______ (month) / ______ (year)
to:  ______ (day) / ______ (month) / ______ (year)  Number of months: __________________________________

<table>
<thead>
<tr>
<th>Course code</th>
<th>Course title</th>
<th>Level of the course (BA or MA)</th>
<th>Number of ECTS credits</th>
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If necessary, continue this 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: RADBOUD UNIVERSITEIT NIJMEGEN (NL NIJMEGE01)
We confirm that the proposed programme of study/learning agreement is approved.
International Office coordinator’s signature  Departmental coordinator’s signature / Course code:
__________________________________________  __________________________________________
Date: __________________________________________  Date: ___________________________