LEARNING AGREEMENT FOR STUDIES
FOR NON ERASMUS STUDENTS
ACADEMIC YEAR 2020/2021

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 University
University code: NL NIJMEGE01 City & country: Nijmegen, The Netherlands
Field of study at receiving institution: ________________________________________________________________
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 UNIVERSITY (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: ________________________________________________________________________________