

**LEARNING AGREEMENT**

**Hochschule Düsseldorf – University of Applied Sciences**

Academic Year 20 / 20 winter term summer term

**Home Institution**

|  |  |
| --- | --- |
| Name of student |  |
| Name of university | Hochschule Düsseldorf , GERMANY |
| Faculty/Department |  |
| Study programme |  |

**Details of the proposed Study Programme Abroad: Guest Institution**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of University | |  | | |
| Faculty/Department | |  | | |
| Country | |  | | |
| **Before the mobility** | | | | | | |
|  | ***Study Programme at the Receiving Institution***  **Planned period of the mobility: from [month/year] ……………. to [month/year] ……………** | | | | | |
| **Table A**  **Before the mobility** | **Component code** (if any) | **Component title at the Receiving Institution** (as indicated in the course catalogue) | | **Semester** | **Number of ECTS credits (or equivalent) to be awarded by the Receiving Institution upon successful completion** | |
|  |  |  | |  |  | |
|  |  |  | |  |  | |
|  |  |  | |  |  | |
|  |  |  | |  |  | |
|  |  |  | |  |  | |
|  |  |  | |  | **Total: …** | |
| Web link to the course catalogue at the Receiving Institution describing the learning outcomes: [*web link to the relevant information*] | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | ***Recognition at the Sending Institution*** | | | |
| **Table B**  **Before the mobility** | **Component code**  (if any) | **Component title at the Sending Institution** (as indicated in the course catalogue) | **Semester** | **Number of ECTS credits (or equivalent) to be recognised by the Sending Institution** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  | **Total: …** |
| Provisions applying if the student does not complete successfully some educational components: *[web link to the relevant information]* | | | | |

Fair translation of grades must be ensured and the student has been informed about the methodology.

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

**We confirm that the proposed program of study/learning agreement is approved:**

**Home Instition:** Departmental Coordinator’s signature and date **Guest Institution:** Departmental Coordinator’s signature and date



**Changes to the original proposed Study Programme Abroad:**

Academic Year 20 / 20 winter term summer term

**Home Institution**

|  |  |
| --- | --- |
| Name of student |  |
| Name of university | Hochschule Düsseldorf , GERMANY |
| Faculty/Department |  |
| Study programme |  |

**Guest Institution**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of University | |  | | |
| Faculty/Department | |  | | |
| Country | |  | | |
| **During the mobility** | | | | | | |
|  | ***Study Programme at the Receiving Institution***  **Planned period of the mobility: from [month/year] ……………. to [month/year] ……………** | | | | | |
| **Table A2**  **During the mobility** | **Component code** (if any) | **Component title at the Receiving Institution** (as indicated in the course catalogue) | | **Semester** | **Number of ECTS credits (or equivalent) to be awarded by the Receiving Institution upon successful completion** | |
|  |  |  | |  |  | |
|  |  |  | |  |  | |
|  |  |  | |  |  | |
|  |  |  | |  |  | |
|  |  |  | |  |  | |
|  |  |  | |  | **Total: …** | |
| Web link to the course catalogue at the Receiving Institution describing the learning outcomes: [*web link to the relevant information*] | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | ***Recognition at the Sending Institution*** | | | |
| **Table B2**  **During the mobility** | **Component code**  (if any) | **Component title at the Sending Institution** (as indicated in the course catalogue) | **Semester** | **Number of ECTS credits (or equivalent) to be recognised by the Sending Institution** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  | **Total: …** |
| Provisions applying if the student does not complete successfully some educational components: *[web link to the relevant information]* | | | | |

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

**We confirm that the proposed program of study/learning agreement is approved:**

**Home Instition:** Departmental Coordinator’s signature and date **Guest Institution:** Departmental Coordinator’s signature and date