**Learning Agreement**

**Student Mobility for Studies**

**Sending institution:** Georg-August Universität Göttingen

***Academic Year: 20\_\_/20\_\_***

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| **Student** | **Last name(s)** | **First name(s)** | **Date of birth** | **Nationality** | **Sex [M/F/D]** | **Study cycle** | **Field of education**  |
|  |  |  |  |  |  |  |
| **Receiving****Institution** | **Name** | **Faculty/ Department** |  | **Address** | **Country** | **Contact person name; email; phone** |
|  |  |  |  |  |  |

 **Before the mobility**

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|  ***Study Program at the Receiving Institution*** **Planned period of the mobility: from [month/year] ……………. to [month/year] ……………** |
| **Table A Before the mobility** | **Course title at the Receiving Institution**(as indicated in the course catalogue) | **Semester**[e.g. autumn/spring;term] | **Number of ECTS credits or local credits****to be awarded by the Receiving****Institution upon successful completion** |
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|  |  | **Total: …** |
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| ***Recognition at the Sending Institution*** |
| **Table B Before the mobility** | **Course title at the Sending Institution**(as indicated in the course catalogue) | **Semester**[e.g. autumn/spring;term] | **Number of ECTS credits or local credits****to be recognized by the Sending****Institution** |
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|  |  | **Total: …** |
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| ***Commitment*** |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Student |  |  | *Student* |  |  |
| Responsible person at theSending Institution |  |  |  |  |  |
| Responsible person at theSending Institution |  |  |  |  |  |