

The Student

| | | | |
|---------------------------|--|--------------------------------|--|
| Name | | Surname | |
| Date of birth | | Sex [M/F] | |
| Nationality | | Accademic Year | |
| Subject area ¹ | | Study cycle (Bachelor, Master) | |
| Telephone | | E-mail | |

The Sending institution

| | |
|--|--|
| Name | UniCamillus – Saint Unicamillus International Medical University of Health Science |
| Erasmus+ ID Code | I ROMA 40 |
| Degree course | |
| Course coordinator (contact person) | |
| Course coordinator (contact person) e-mail | |

The Receiving institution

| | |
|--|--|
| Name | |
| Erasmus+ ID Code | |
| Degree course | |
| Course coordinator (contact person) | |
| Course coordinator (contact person) e-mail | |

Before the mobility

Study Programme at the Receiving Institution

The Student

| | | | |
|------|--|---------|--|
| Name | | Surname | |
|------|--|---------|--|

Planned period of mobility

| | | | |
|-----------------------|--|---------------------|--|
| Start Month (mm/yyyy) | | End Month (mm/yyyy) | |
|-----------------------|--|---------------------|--|

TABLE A - Study programme abroad

| Course code | Course title at receiving institution | Semester | ETC Credits |
|--------------|---------------------------------------|----------|-------------|
| | | | |
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| | | | |
| | | | |
| | | | |
| Total | | | |

Course catalogue at Receiving Institution

| | |
|-----------------|--|
| Web link | |
|-----------------|--|

Language competence of the student

The level of language competence in that the student already has or agrees to acquire by the start of the study period (for the above-mentioned dates) is:

A1 A2 B1 B2 C1 C2 Native speaker

TABLE B - Recognized courses at Sending Institution

| Course code | Course title at sending institution | Semester | ETC Credits |
|-------------|-------------------------------------|----------|-------------|
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| | | | |
| | | | Total |

If a student does not successfully complete some courses they will have to take the exams at the sending institution (UniCamillus University).

Commitment of the three parties

By signing this document, the student, the sending institution, and the receiving institution confirm that they approve the Learning Agreement and that they will comply with all the arrangements agreed by all parties. The sending and the receiving Institution undertake to apply all the principles of the Erasmus+ Charter for Higher Education relating to mobility for studies (or the principles agreed in the inter-institutional agreement for institutions located in partner countries).

The receiving institution confirms that the educational components listed in Table A are in line with its course catalogue.

The sending institution confirms that the course listed in Table B are in line with its course catalogue.

The sending institution commits to recognise the credits gained at the receiving institution for the successfully completed courses where applicable, and to count them towards the student's degree as described in Table B. In the case of any alternative system of assessment, this will be clearly outlined to the student ahead of his/her departure.

The student and receiving institution will communicate to the sending institution any problems or changes regarding the proposed mobility programme, responsible persons and/or study period.

| | Date (dd/mm/yyyy) | Name | Signature |
|------------------------------|----------------------|------|-----------|
| Student | | | |
| Sending Institution | | | |
| Receiving Institution | | | |

During the mobility

The Student

| | | | |
|-------------|--|----------------|--|
| Name | | Surname | |
|-------------|--|----------------|--|

Exceptional changes to TABLE A - Study programme abroad

| Course code | Course title at receiving institution | Deleted course | Added course | Reason for change | ETC Credits |
|--------------|---------------------------------------|--------------------------|--------------------------|-------------------|-------------|
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Total | | | | | |

Exceptional changes to TABLE B - Recognized courses at Sending Institution (if applicable)

| Course code | Course title at sending institution | Deleted course | Added course | Reason for change | ETC Credits |
|--------------|-------------------------------------|--------------------------|--------------------------|-------------------|-------------|
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Total | | | | | |

Commitment of the three parties

The student, the sending institution and the receiving institution confirm that the proposed changes to the Learning Agreement are approved.

| | Date (dd/mm/yyyy) | Name | Signature |
|------------------------------|----------------------|------|-----------|
| Student | | | |
| Sending Institution | | | |
| Receiving Institution | | | |

After the mobility

The Student

| | | | |
|-------------|--|----------------|--|
| Name | | Surname | |
|-------------|--|----------------|--|

Period of mobility

| | | | |
|--------------------------------|--|------------------------------|--|
| Start date (dd/mm/yyyy) | | End date (dd/mm/yyyy) | |
|--------------------------------|--|------------------------------|--|

Table C - Transcript of records at Receiving Institution

Please attach to this document the Official Transcript of Records of receiving institution.

| Course code | Course title at receiving institution | ECTS Credit | Successfully completed? [Yes/No] | Grades awarded |
|--------------|---------------------------------------|-------------|-------------------------------------|----------------|
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| | | | | |
| | | | | |
| Total | | | | |

TABLE D - Transcript of Records and Recognition at the Sending Institution

| Course code | Course title at sending institution | Grades awarded | ETC Credits |
|-------------|-------------------------------------|----------------|-------------|
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Erasmus+

Higher Education
Learning Agreement
AY 20__/20__

UNICAMILLUS

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|--|--|--|--------------|
| | | | |
| | | | |
| | | | |
| | | | Total |

| | Date (dd/mm/yyyy) | Name | Signature |
|------------------------------|-----------------------------|-------------|------------------|
| Student | | | |
| Sending Institution | | | |
| Receiving Institution | | | |