Learning Agreement

Student Mobility for Studies

Erasmus+
**Higher Education
Learning Agreement
AY 20___/20___**

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)**	

1

TABLE A - Study programme abroad

Course code	Course title at receiving institution	Semester	ETC Credits
		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

	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	Signiture
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
		☐	☐		
		☐	☐		
		☐	☐		
		☐	☐		
				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
		☐	☐		
		☐	☐		
		☐	☐		
		☐	☐		
				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	Signiture
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
	Total			

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

Course code	Course title at sending institution	Grades awarded	ETC Credits

		Total	

	Date (dd/mm/yyyy)	Name	Signiture
Student			
Sending Institution			
Receiving Institution			