**Student’s name**

**Academic year 20…/20…**

**Section to be completed DURING THE MOBILITY**

**CHANGES TO THE ORIGINAL LEARNING AGREEMENT**

*[The section to be completed before the mobility should be kept unchanged, and changes should be described in this section only.]*

1. **EXCEPTIONAL CHANGES TO THE PROPOSED MOBILITY PROGRAMME**

Table C: Exceptional changes to study programme abroad

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Component code (if any) at the receiving institution** | **Component title (as indicated in the course catalogue) at the receiving institution** | **ECTS** | **Deleted component**  ***[tick if applicable]*** | **Added component**  ***[tick if applicable]*** | **Name, code and number of ECTS credits in the sending institution to be awarded by the receiving institution upon successful completion of the component**[[1]](#footnote-1) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **CHANGES IN THE RESPONSIBLE PERSON(S), if any:**

**New responsible person in the sending institution:**

Name: Function: Phone number: E-mail:

**New responsible person in the receiving institution:**

Name: Function: Phone number: E-mail:

1. **COMMITMENT OF THE THREE PARTIES**

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

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

|  |  |
| --- | --- |
| **The receiving institution**  Responsible person’s signature | Date: |

|  |  |
| --- | --- |
| **The sending institution**  Degree Course President  Responsible person’s signature | Date: |

1. [↑](#footnote-ref-1)