EUSA international office

# MODIFICATIONS TO LEARNING AGREEMENT

**Student name:** **PASSPORT: _____**

CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT *(to be filled in only if appropriate)*

| Course code | Course name | Drop course | Add course | Maintain |
|---|---|---|---|---|
| | | ☐ | ☐ | ☐ |
| | | ☐ | ☐ | ☐ |
| | | ☐ | ☐ | ☐ |
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**STUDENT SIGNATURE**

Date: - - Signature:

**HOME INSTITUTION**

We confirm that this proposed learning agreement is approved.

| Departmental Co-ordinator's signature<br>Date: ___/ ___/ ____ | Institutional Co-ordinator's signature<br>Date: ___/ ___/ ____ |
|---|---|

**HOST INSTITUTION**

We confirm that this proposed learning agreement is approved.

| Departmental Co-ordinator's signature<br>Date: ___/ ___/ ____ | Institutional Co-ordinator's signature<br>Date: ___/ ___/ ____ |
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