

LEARNING AGREEMENT

ACADEMIC YEAR _____ – FIELD OF STUDY: _____

Name of student:	
Sending Institution:	Country:

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT

Receiving institution: Pskov State University	Country: Russia
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Course code (if any) and page no. of the information package	Course title (as in the information package)	Number of Credits ECTS
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If necessary, continue the list on a separate sheet

Student`s signature:	Date:
.....

SENDING INSTITUTION	
We confirm that the proposed programme of study/learning agreement is approved.	
Faculty coordinator`s signature:	University (International Office) coordinator`s signature:
.....
Date:	Date:
.....

RECEIVING INSTITUTION	
We confirm that the proposed programme of study/learning agreement is approved.	
Faculty coordinator`s signature:	University (International Office) coordinator`s signature:
.....
Date:	Date:
.....

Reverse side

Name of student:
Sending institution: Country:

**CHANGES IN THE PROPOSED STUDY PROGRAMME
ABROAD/LEARNING AGREEMENT**

Course code (if any) and page no. of the information package	Course title (as in the information package)	Courses which have not been followed	Courses added	Number of Credits ECTS
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If necessary, continue the list on a separate sheet

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