**ECTS – European Credit Transfer System**

**Learning Agreement for Outgoing Students**

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| **Winter Term 20**      **(01.10.-31.03.)** | **Summer Term 20**      **(01.04.-30.09.)** | **Winter + Summer Term 20**     **/**20 |

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| **Name of Student:** | **Sending Institution:** *University of Bremen* | **Receiving Institution:** |
| **Mail Address**:  **Matriculation No.**.: | **Field of Study** (in Bremen):  **Level:** Bachelor ; Master | **Country**:  **Weblink to Course offer**: |

**Details of the Proposed Study Programme Abroad**

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| **Study Plan at Receiving Institution** | | | |  | **Study Plan at Sending Institution** | | |
| **Course Unit Code** | **Course Level** | **Course Title** | **Amount of Credits** |  | **Course Unit Code** | **Course Title**  **(Equivalent Course recognized at University of Bremen)** | **Amount of Credits** |
|  | B M |  |  |  |  |  |  |
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|  | **Total Credits:** | |  |  |  | **Total ECTS Credits:** |  |

If necessary, continue the list on a separate sheet If necessary, continue the list on a separate sheet

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|  | **1. Student** |  |  |  | **2. Sending Institution**  We confirm that the proposed Learning Agreement is approved |  |  |  | **3. Receiving Institution**  We confirm that the proposed Learning Agreement is approved |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | Date / Signature Student |  |  |  | Date / Signature Departmental Coordinator |  |  |  | Date / Signature Departmental Coordinator |  |
|  |

ECTS – European Credit Transfer System: **Changes to Original Learning Agreement**

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| **Winter Term 20** | **Summer Term 20** | **Winter + Summer Term 20**     **/20** |

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| **Name of Student:** | **Sending Institution:** *University of Bremen* | **Receiving Institution:** |
| **Mail Address**:  **Matriculation No.**.: | **Field of Study** (in Bremen):  **Level:** Bachelor ; Master | **Country**:  **Weblink to Course offer**: |

**Changes to Original Proposed Study Programme Abroad**

(To be filled in only if necessary – please remember: you still need 30 ECTS per semester!)

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| **Code** | **Course Level** | **Course Title** | Dele-ted | Added | Un-changed | **Credits** |  | **Code** | **Course Title**  **(Equivalent Course recognized at University of Bremen)** | Dele-ted | Added | Un-changed | **ECTS** |
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|  | **Total Credits:** | | | | |  |  |  | **Total ECTS Credits:** | | | |  |  |  |  |  |

If necessary, continue the list on a separate sheet If necessary, continue the list on a separate sheet

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **1. Student** |  |  |  | **2. Sending Institution**  We confirm that the proposed Learning Agreement is approved |  |  |  | **3. Receiving Institution**  We confirm that the proposed Learning Agreement is approved |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | Date / Signature Student |  |  |  | Date / Signature Departmental Coordinator |  |  |  | Date / Signature Departmental Coordinator |  |