

Changes of the Learning Agreement

Semester (abroad): _____ Date: _____

Matriculation number: _____ Study Programme: B.Sc.
M.Sc.

Surname: _____ First name: _____

Address: _____

Phone: _____ E-mail: _____

Home country: _____

Support programme: Yes No Which? _____

Place/country of semester abroad: _____

Name of the university: _____

Is this a partner university? Yes No

Date of departure: _____ Duration of stay: _____

Proposed programme of study			
Course code	Course title	HPW / Credits abroad	Credits BTU

STUDENT

BTU

HOST UNIVERSITY

We hereby confirm that this study programme has been acknowledged.

Date and signature of student

Date and signature of Head of Examination Board

Date, signature and stamp of University / department coordinator