

LEARNING AGREEMENT STUDENT EXCHANGE PROGRAM

Name	
Student Number	
Faculty/Department	
Academic Year/Semester of Exchange	
Email	
Name of Program	
Home University and Country	
Host University and Country	

Initial Proposed Study Program during application process

COURSES AT HOST UNIVERSITY			ADMITTED COURSES AT HOME UNIVERSITY	
Course Code	Course Title	Credits Host Univ.	Course Title	Credits Home Univ.

During program if there are changes to the original proposed study program

COURSES AT HOST UNIVERSITY			ADMITTED COURSES AT HOME UNIVERSITY	
Course Code	Course Title	Credits Host Univ.	Course Title	Credits Home Univ.

Students Signature

(_____)
Date:

Home University

The proposed study program has been approved by:
Office of International Affairs UGM

(departmental coordinator's signature)

(_____)
Date:

(_____)
Date:

Host University

This proposed study program has been approved by:
(Institutional Coordinator signature and stamp)

(departmental coordinator's signature)

(_____)
Date:

(_____)
Date: