**LEARNING AGREEMENT**

**ECTS - EUROPEAN CREDIT TRANSFER SYSTEM**

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| ACADEMIC YEAR: | Choose year | FIELD OF STUDY: |  |
| Name of student:  Sending institution:  Country: | | | |

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT

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| Receiving institution: Warsaw University of Life Sciences - SGGW  Country: Poland |

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| No. | Course unit title (course catalogue: <http://www.sggw.pl/en/international-cooperation_/information-for-students/sggw-studies-in-english/subjects-in-english> ) | Number of ECTS credits |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| Total: | |  |

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| **STUDENT’S SIGNATURE**  ......................................................................................... Date: *Choose date* |

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| **HOME INSTITUTION**  We confirm that the proposed programme of study/learning agreement is approved. | |
| Departmental coordinator’s signature  Name:………………………………………………...  Signature:…………………………………………….  Date: *Choose date* | Institutional coordinator’s signature  Name: …………………………………………………………  Signature....................................................................................  Date: *Choose date* |

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| **RECEIVING INSTITUTION**  We confirm that this proposed programme of study/learning agreement is approved. | |
| Departmental coordinator’s signature:  Name:………………………………………………...  Signature:…………………………………………….  Date: *Choose date* | Institutional coordinator’s signature:  Name:……………………………………………….................  Signature:………………………………………………………  Date: *Choose date* |