



Erasmus+



INSTITUTO SUPERIOR DE ENTRE DOURO E VOUGA

LIFELONG LEARNING PROGRAMME
ECTS EUROPEAN CREDIT TRANSFER SYSTEM

LEARNING AGREEMENT

Academic year: 2016/2017

Field of study:

Name of student:
Sending institution:

Details of the proposed study programme abroad/Learning Agreement

Receiving institution: ISVOUGA – Instituto Superior de Entre Douro e Vouga Erasmus code: P AVEIRO 05

Course code (if any) of the information package	Course title (as indicated in the information Package)	Number of ECTS credits

Student's signature: Date:

Sending institution
We confirm that this proposed programme of study/learning agreement is approved.
Date: _____
Departmental and Local Institutional Coordinator's signature



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INSTITUTO SUPERIOR DE ENTRE DOURO E VOUGA

Receiving institution

We confirm that this proposed programme of study/learning agreement is approved.

Date: _____

Departmental Coordinator's signature

Institutional Coordinator's signature

Name of student

Sending institution:

Changes to original proposed study programme/Learning Agreement

(to be filled in **ONLY** if appropriate)

Course code (if any) of the information package	Course title (as indicated in the information Package)	Deleted course	Added course	No. of ECTS credits
		[]	[]	
		[]	[]	
		[]	[]	
		[]	[]	
		[]	[]	
		[]	[]	
		[]	[]	

Student's signature:

Date:

Sending institution

We hereby confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.

Date: _____

Departmental Coordinator's signature

Receiving institution

We hereby confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.

Date: _____

Departmental Coordinator's signature

Institutional Coordinator's signature