

LEARNING AGREEMENT FOR STUDIES

I. IDENTIFICATION DETAILS

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The Student							
Last name, first name(s):							
Date of birth:	DD/MM/YYYY	Nationality:	Sex	: M	lale 🗌] Female	ġ 🗌
Academic year	201_/201_						
Semester:	Winter Sum	Winter Summer Academic year					
Study area:							
Contact e-mail, phone:							
The Sending Institution							
Name:	Brno University	of Technology					
Faculty, department:							
Address:			Countr	y: (Czech R	Republic	
	Conta	act person ¹					
Full name and function:							
Contact e-mail, phone:							
The Receiving Institution							
Name:							
Faculty, department:							
Address:			Countr	y:			
	Conta	act person ²					
Full name and function:							
Contact e-mail, phone:							
Period of mobility:	from DD/MM/Y	YYY till DD/MM	/YYYY				
Total months:							

 $^{^{1}}$ Contact person can be a staff from the international office or a staff who is in charge of outgoing students.



II. PROPOSED MOBILITY PROGRAMME

Course code (if any)	Course title/activity (theses, excursions etc.)	ECTS	Recognized course at home institution	ECTS
	Credits Total:		Credits Total:	

Provisions that will apply if some educational components would not be successfully completed:

[The final Transcript of Records should correspond to this Learning Agreement and its eventual Changes. Courses attended but not successfully completed should therefore be included in the Transcript of Records as well. If not possible due to serious reasons, student may be requested to provide a confirmation of attendance from the course lecturer or similarly relevant explanation instead. If the number of credits obtained does not meet the minimum requirements according to the BUT regulations, the student may be asked to return a comparative portion of the awarded grant.

If the receiving institution doesn't use ECTS, the Transcript of Records must include a comprehensive mechanism to determine the equivalency between local grades and credits and ECTS.

III. COMMITMENT OF THE THREE PARTIES

The receiving institution confirms that the educational components listed are in line with its course catalogue.

The sending institution commits to recognise all the credits gained at the receiving institution for the successfully completed educational components and to count them towards the student's degree.

The student and the receiving institution will communicate to the sending institution any problems or changes regarding the proposed mobility programme and study period.

	Full name	Date	Signature and stamp (if applicable)
Student			
Sending institution Representative			
Receiving institution Representative			



CHANGES to LEARNING AGREEMENT FOR STUDIES

I. IDENTIFICATION DETAILS OF THE STUDENT

Last name, first name(s):						
Date of birth:	DD/MM/YYYY	Nationality:		Sex:	Male Female	
Academic year	201_/201_					
Semester:	Winter Summer Academic year					
Study area:						
Contact e-mail, phone:					_	

II. CHANGES TO THE ORIGINAL PROPOSED MOBILITY PROGRAMME

	ADDED COURSES								
Course code (if any)	Course title/activity (theses, excursions etc.)	ECTS	ECTS Recognized course at home institution						
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	DELE	TED CO	URSES						
code (if any)	Course title/activity (theses, excursions etc.)	ECTS	Recognized course at home institution						
		-X	n/a						
		-X	n/a						
		-X	n/a						
		-X	n/a						
		-X	n/a						
	Credits Change Total:								
	Total Credits after Changes:								

III. COMMITMENT OF THE THREE PARTIES

Both receiving and sending institution hereby confirm the approval of above-mentioned changes to the original proposed programme.

The sending institution commits to recognise all the credits gained at the receiving institution for the successfully completed educational components listed in both Learning Agreement and its Changes.



	Full name	Date	Signature and stamp (if applicable)
Student			
Sending institution Representative			
Receiving institution Representative			