



**Section to be completed DURING THE MOBILITY
CHANGES TO THE ORIGINAL LEARNING AGREEMENT**

First name:

Last name:

I. EXCEPTIONAL CHANGES TO THE PROPOSED MOBILITY PROGRAMME

Table C: Exceptional changes to study programme abroad or additional components in case of extension of stay abroad

Component code (if any) at the receiving institution	Component title (as indicated in the course catalogue) at the receiving institution	Deleted / Added component	Reason for change	Number of ECTS credits to be awarded by the receiving institution upon successful completion of the component
Total				

Reason for change

<i>Reason for deleting a component</i>	<i>Reason for adding a component</i>
<p>A1) Previously selected educational component is not available at receiving institution</p> <p>A2) Component is in a different language than previously specified in the course catalogue</p> <p>A3) Timetable conflict</p> <p>A4) Other</p>	<p>B1) Substituting a deleted component</p> <p>B2) Extending the mobility period</p> <p>B3) Other</p>



First name:

Last name:

Table D: Exceptional changes in the recognition of educational components as compared to Table B (Section: Before the Mobility)

Component code (if any) at the receiving institution	Component title (as indicated in the course catalogue) at the receiving institution	Deleted / Added component	Number of ECTS credits at the sending institution
Total			



First name:

Last name:

II. CHANGES IN THE RESPONSIBLE PERSON(S), if any:

New responsible person in the sending institution:

Name: _____ Function: _____
Phone number: _____ E-mail: _____

New responsible person in the receiving institution:

Name: _____ Function: _____
Phone number: _____ E-mail: _____

III. The student, the sending and the receiving institutions confirm that they approve the proposed amendments to the mobility programme.

The student

Student's signature _____ Date _____

The sending institution

Responsible person's signature and stamp _____ Date _____

The receiving institution

Responsible person's signature and stamp _____ Date _____