**Learning Agreement**

 **Student Mobility for Studies**

**After the Mobility/Transcript of Records**

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| --- | --- | --- |
|  | ***Transcript of Records at the Receiving Institution*** **Start and end dates of the study period: from [day/month/year] ……………. to [day/month/year] …………….** |  |
|  | **Name of the exchange student** |  | **Host Organization** |  |  |
|  |  |  |  |  |  |  |
|  | **Component code** (if any) | **Component title at the Receiving Institution** (as indicated in the course catalogue)  | **Was the component successfully completed by the student?** [Yes/No] | **Number of ECTS credits** (or equivalent) | **Grades received at the Receiving Institution1** |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |  |
|  |  |  |  | Total:  |  |  |
|  | Activities carried out during short-term mobility for studies (if the table above is not applicable):  |  |
|  | Signature of responsible person in receiving institution and date  |  |

|  |  |  |  |  |  |  |  |  |  |
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