



# FUCE SCHOLARSHIP MOBILITY PROGRAMME

## LEARNING AGREEMENT 2026-2027

Academic Year 20.../20...

**Field of study:** .....

Name of student: .....

Sending institution:

..... Country: .....

## **DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT**

### Receiving institution:

.....  
Country: .....

| Course unit code (if any) and page no. of the information package | Course unit title (as indicated in the information package) | Number of ECTS credits |
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Fair translation of grades must be ensured and the student has been informed about the methodology

Student's signature

Date: .....

#### SENDING INSTITUTION

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

Departmental coordinator's signature

Institutional coordinator's signature

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Date: .....

Date: .....

#### **RECEIVING INSTITUTION**

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

Departmental coordinator's signature

Institutional coordinator's signature

.....

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Date: .....

Date: .....

Name of student: .....

Sending institution:

..... Country: .....

**CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME/LEARNING AGREEMENT**  
(to be filled in ONLY if appropriate)

if necessary, continue this list on a separate sheet

Student's signature ..... Date: .....

## SENDING INSTITUTION

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

Departmental coordinator's signature

Institutional coordinator's signature

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#### RECEIVING INSTITUTION

We confirm by the above-listed changes to the initially agreed programme of study/learning agreement are

approved.

Departmental coordinator's signature

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Date: .....

Institutional coordinator's signature

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Date: .....

to be sent to:  
[contact@fuce.eu](mailto:contact@fuce.eu)