Learning agreement 1



ECTS - EUROPEAN CREDIT TRANSFER SYSTEM LEARNING AGREEMENT

ACADEMIC YEAR: FIELD OF STUDY at RU:

Name of student:							
Sending institution:							
Country:							
Receiving institution: Roskild	e University						
Denmark							
DETAILS OF THE PROPOSEI	D STUDY PRO	GRAMME A	ABROAD/LEARNIN	G AGREEMENT AT	THE TIME		
OF APPLICATION. If there is	s substantial cha	inges to this	learning agreement	an new one must be m	ade.		
EXCHANGE PROGRAMME: A project is a compulsory		_	Nordlys \Box Other \Box				
Please make sure to stat	te field of st	udy whei	n you fill out the	e section below.			
(It is IMPORTANT to fill or	ut this section	correctly i	n order to make yo	our registration at RU	J possible.		
AUTUMN SEMESTER:					_		
This section must be filled out by the student	This section must be filled out by the Departmental Coordinator at Roskilde University Number of ECTS credits						
Project	Basic stud	Bachelor	Master Module 1	Master Module 2			
Please state field of study:	Programme						
Course 1:	Basic stud	Bachelor	Master Module 1	Master Module 2			
Please state field of study:	Programme						
Course 2:	Basic stud Programme	Bachelor	Master Module 1	Master Module 2			
Please state field of study:							
	Basic stud	Bachelor	Master Module 1	Master Module 2			
Course 3:	Programme						

ROSKILDE UNIVERSITY

Learning agreement 2



SPRING SEMESTER:

This section must be filled by the student	the student the st						
Project	Basic stud	Bachelor	Master Module 1	Master Module 2			
Please state field of study:	Programme						
Course 1:	Basic stud Programme	Bachelor	Master Module 1	Master Module 2			
Please state field of study:	_						
Course 2:	Basic stud Programme	Bachelor	Master Module 1	Master Module 2			
Please state field of study							
Course 3:	Basic stud Programme	Bachelor	Master Module 1	Master Module 2			
Please state field of study:							
Student's signature		Da	ate:				
SENDING INSTITUTION	N						
We confirm that the prop	osed programme of	study/learnii	ng agreement is appr	coved.			
Departmental coordinato	r's signature OR	Insti	tutional coordinator'	s signature			
	Date:			Date:			
RECEIVING INSTITUT	ION:						
We confirm that this prop		study/learni	ng agreement is app	roved.			
Departmental Coordinate		-					
1	Roskilde University, International Office, Universitetsvej 1, 4000 Roskilde, Denmark Fax No. +45-4674 3003						
Deadlines:	Autumn semester: May 1 Spring Semester: October 1						

Please note that a complete application includes a correctly filled out Learning Agreement!