

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

Name of student:

Sending institution: **Universität Stuttgart**

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD

Receiving institution

CHANGES TO LEARNING AGREEMENT

Course unit code (if any) and page no. of the information package	Course unit title (as indicated in the information package)	Deleted course unit	Added course unit	Number of ECTS Credits
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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

Date:

Date:

RECEIVING 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

Date:

Date: