

Name of student:

Programme at BTH:

Sending Institution: Blekinge Institute of Technology (BTH)

LEARNING AGREEMENT

Country: Sweden

ACADEMIC YEAR

FIELD OF STUDY:

Receiving Institution:		Country:							
DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD									
Course code	Course	Credits							
	Total:								
	If necessary, continue the list.								
COURSES A	AT SENDING INSTITUTION WH	IICH WILL BE REPLACED							
Course code		Course	Credits						
	Total:								
	If necessary, continue the	e list.							
The student									
	Date								
Student's name	Student's name and signature: Date:								
The sending i	institution	The receiving institution							
Responsible programme manager's name and signature:		Responsible person's name and signature:							
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Date:		Date:							



CHANGES TO THE ORIGINAL PROPOSED LEARNING AGREEMENT

Name of studer	Name of student:							
Programme at	втн:							
Sending Institut	tion: Blekinge Institute of Technology (B7	Country: Sweden Country:						
Receiving Instit	ution:							
Course code	Course		Deleted	Added		Credits		
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				T	 otal:			
	If necessary, continue the	e list.				<u>.I</u>		
The student								
Student's signatu	re:	Date:						
The sending ins	titution	The receiving instituti	ion					
Responsible programme manager's name and signature:		Responsible person's name and signature:						
Date:		Date:						