##### LEARNING AGREEMENT

**Double Degree/Double Diplôme**

**Academic year: 20\_- 20\_\_**

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| **STUDENT (SURNAME/NAME):**  Matriculation number:  Degree programme: |
| NAME OF HOME INSTITUTION: **Università degli Studi di Milano**  Department/Faculty:  Academic Coordinator: Professor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail: |
| NAME OF HOST INSTITUTION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Department/Faculty:  Academic Coordinator: Professor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  e-mail: |

**DETAILS OF THE PROPOSED STUDY PROGRAMME**

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| PARTNER UNIVERSITY (Host Institution ) | |
| Course Unit Title (Denominazione corso) | ECTS |
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| Student’s name Student’s signature |
| **HOME INSTITUTION:** We confirm that the proposed learning agreement is approved**.**  **Academic Coordinator’s signature**  **Date Stamp (no need in case of e- signature)** |
| **HOST INSTITUTION:** We confirm that the proposed learning agreement is approved**.**  **Academic Coordinator’s signature**  **Date Stamp (no need in case of e- signature)** |

**CHANGES TO ORIGINAL STUDY PROGRAMME   
Academic year : \_\_\_\_\_\_\_\_\_\_\_\_\_**

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| PARTNER UNIVERSITY (Host Institution ) | |
| Course Unit Title (Denominazione corso) | ECTS |
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| Student’s name Student’s signature |
| **HOME INSTITUTION:** We confirm that the proposed programme of study/learning agreement is approved**.**  **Academic Coordinator’s signature**  **Date Stamp (no need in case of e- signature)** |
| **HOST INSTITUTION:** We confirm that the proposed programme of study/learning agreement is approved**.**  **Academic Coordinator’s signature**  **Date Stamp (no need in case of e- signature)** |