



## CHARM-EU Learning agreement for online courses

First name:

Family name:

Email:

Study level:

Field of study:

Home university:

Faculty / Department:

Name of the University offering the online course:

Course code (if applicable) at the Receiving Institution	Title of the course at the Receiving Institution (as indicated in the Course Catalogue)	Number of ECTS credits to be awarded by the Receiving Institution
Course code at the Sending Institution	Title of the course at the Sending Institution	Number of ECTS credits to be recognised by the Sending Institution
Total credits:		

*Students are aware that they are responsible for ensuring there are no timetable clashes between the CHARM-EU Transnational Online Learning courses and the courses they are taking at their home university.*

### STUDENT SIGNATURE

I confirm that I will participate in these courses and **inform the receiving institution in advance in case I cannot attend for any reason**

### SENDING UNIVERSITY – DEPARTMENTAL COORDINATOR SIGNATURE

I confirm that this proposed learning agreement/study plan is approved.