Dear Student, please note, that the Learning Agreement only functions as a proposed study programme, which may have to be changed after your arrival.

Please, fill in the form, print it and obtain the signature from your home University coordinator, do not forget to sign it yourself too. Filled, signed and scanned document should be sent to the following e-mail address: atavartkiladze@cu.edu.ge

No need to send hard copy!

**Academic Year**: 20.../20…

Please indicate the semester you are applying for: **Fall Semester (I)** □ **Spring Semester** (II) □

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Last Name (s) | First Name (s) | Home University | Field of Studies | Study Cycle |
|  |  |  |  |  |

**Before the Mobility**

*Study Programme at the Receiving Institution (CU)*

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| --- | --- | --- | --- |
| Component Code | Component Title at the Receiving Institution | Semester | Number of ECTS Credits |
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|  |  |  | **Total ECTS**: |

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| --- |
| Commitment  |
| Commitment | **Name/Surname** | **E-mail** | **Position** | **Date** | **Signature** |
| Student |  |  |  |  |  |
| Responsible Person at the Sending Institution |  |  |  |  |  |
| Responsible Person at the Receiving Institution |  |  |  |  |  |

**During the Mobility**

*Exceptional Changes at the Receiving Institution (CU)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Component Code | Component Title at the Receiving Institution | Deleted Component (please put mark sign) | Added Component(please put mark sign) | Semester | Number of ECTS Credits |
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| Commitment  |
| Commitment | **Name/Surname** | **E-mail** | **Position** | **Date** | **Signature** |
| Student |  |  |  |  |  |
| Responsible Person at the Sending Institution |  |  |  |  |  |
| Responsible Person at the Receiving Institution |  |  |  |  |  |