



Planned Study Abroad | International Exchange Programmes

Name of student

Field of study

Academic year

Winter semester

Summer semester

Sending institution

Receiving institution

Course code (if appropriate)

Course title

If necessary continue this list on an extra sheet.

Please note that all changes to the learning agreement must be approved by the departmental coordinator at TU Braunschweig.

Signature

Date

Signature

To be completed by the office

Technische Universität Braunschweig: We confirm that the learning agreement is approved.

Date

Departmental coordinator's signature

Date

Institutional coordinator's signature

Receiving Institution: We confirm that the learning agreement is approved.

Date

Institutional coordinator's signature