**Erasmus+ Learning Agreement Student Mobility for Studies**

## Mobility between Erasmus+ countries (EU Member States and third countries associated to the Programme)

**General information**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Student** | **Last name(s)** | **First name(s)** | **Date of birth** | | **Nationality** | | **Gender** |
|  |  |  | |  | |  |
| **European Student Identifier (ESI)** [Unique electronic identifier for mobile students] | | **Level of education (EQF level)** | | **Field of education**  **(ISCED code)** | | **Field of education  (clarification)** |
|  | |  | |  | |  |
| **Sending Institution** | **Name** | **Faculty/Department** | | **Erasmus code** | **Country** | **Administrative contact person name; email** | |
|  |  | |  |  |  | |
| **Receiving Institution** | **Name** | **Faculty/Department** | | **Erasmus code** | **Country** | **Administrative contact person name; email** | |
| Pavol Jozef Šafárik University in Košice | Choose a faculty. | | SK KOSICE02 | Slovakia | Mgr. Filip Šera, PhD.  Filip.sera@upjs.sk | |
| The level of language competence in \_\_\_\_\_\_\_\_ [indicate here the main language of instruction] that the student already has or agrees to acquire by the start of the study period is:  *A1*  *A2*  *B1*  *B2*  *C1*  *C2*  *Native speaker* | | | | | | | |

**Exceptional changes to the learning agreement**

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|  | **Exceptional changes to Table A** | | | | | |
| **Table A2** | **Component code** (if any) | **Component title at the** **Receiving Institution** (as indicated in the course catalogue) | **Deleted component** [tick if applicable] | **Added component** [tick if applicable] | **Reason for change** [Add the applicable reason code or write other reason] | **Number of ECTS credits (or equivalent) to be awarded** |
|  |  |  |  |  | Choose an item. |  |
|  |  |  |  |  | Choose an item. |  |

|  |  |  |  |  |  |  |  |
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| **Exceptional changes to Table B (if applicable)** | | | | | | | |
| **Table B2** | **Component**  **code** (if any) | **Component title at the**  **Sending Institution** (as indicated in the course  catalogue) | **Deleted component** [tick if applicable] | **Added component** [tick if applicable] | **<Reason for change>** | **Number of ECTS credits (or equivalent) to be awarded** | **Automatic recognition**  [Yes/No] |
|  |  |  |  |  |  |  |
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| **Exceptional changes to Table C (if applicable)** | | | | | | |
| **Table C2** | **Component**  **code (if any)** | **Component title or description of the study**  **programme at the Receiving Institution** | **Short description of the virtual component** | **Reason for change**  [Add the applicable reason code or write other reason] | **Number of ECTS credits (or equivalent) to be awarded** | **Automatic recognition**  [Yes/No] |
|  |  |  | Choose an item. |  |  |
|  |  |  | Choose an item. |  |  |

**Approval of exceptional changes to the learning agreement**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| By digitally signing/approving this document, the student, the Sending Institution and the Receiving Institution confirm that they approve the learning agreement and that they will comply with all the arrangements agreed by all parties. Sending and Receiving Institutions undertake to apply all the principles of the Erasmus Charter for Higher Education relating to mobility for studies The Beneficiary Institution and the student must also commit to what is set out in the Erasmus+ grant agreement. The Receiving Institution confirms that the educational components listed are in line with its course catalogue or as agreed otherwise and should be available to the student. The Sending Institution commits to recognise all the credits or equivalent units gained at the Receiving Institution for the successfully completed educational components and to count them towards the student's degree. The student and the Receiving Institution will communicate to the Sending Institution any problems or changes regarding the study programme, responsible persons and/or study period. | | | | | |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Approval** |
| Student |  |  | *Student* |  |  |
| Responsible person at theSending Institution |  |  |  |  |  |
| Responsible person at theReceiving Institution |  |  |  |  |  |