

Bitte mit folgenden Dateinamen gem. Muster abspeichern und an fb07international@uni-bremen.de senden:

Land_Stadt_Uni_Nachname_Vorname_Fachsemester_MA_before.pdf

ECTS Learning Agreement – Before Mobility

Outgoings Master



Semester abroad:

Name:

E-Mail:

Matricul. No. (Bremen):

Specialization Area:

Fachsemester:

Receiving University:

Country:

Coordinator Name + E-Mail:

Web link Course Offer:

Web link Local Grading:

Details of Proposed Study Programme Abroad

Study Plan at University of Bremen	
Course Title	ECTS Credits

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Study Plan at receiving University			
Course Unit Code	Course Level	Course Title	Local Credits / ECTS Credits
	B M		
	B M		
	B M		
	B M		
	B M		
	B M		
	B M		

Other Courses:

{
{

	B M		
	B M		
	B M		
	B M		
	B M		
	B M		
	B M		

Student

University of Bremen

Receiving University

We confirm that the proposed Learning Agreement is approved.

We confirm that the proposed Learning Agreement is approved.

Date / Signature

Date / Signature Departmental Coordinator

Date / Signature Departmental Coordinator