

# Navodila za izpolnjevanje Learning agreementa

## GLAVA DOKUMENTA

Annex-Erasmus+ HE Learning Agreement for students-2016



### Learning Agreement Student Mobility for Studies

#### 1. Izpolnite s svojimi podatki

Higher Education:  
Learning Agreement form  
Student's name  
Academic Year 20.../20...

+

2	Student	Last name(s)	First name(s)	Date of birth	Nationality <sup>1</sup>	Sex [M/F]	Study cycle <sup>2</sup>	Field of education <sup>3</sup>
							gl. navodila na koncu dokumenta	011 - Education
	Sending Institution	Name	Faculty/Department	Erasmus code <sup>4</sup> (if applicable)	Address	Country	Contact person name <sup>5</sup> ; email; phone	
		University of Ljubljana	Faculty of Education	SI LJUBLJA01	Kardeljeva ploščad 16	Slovenia	Igor Repac, <a href="mailto:international@pef.uni-lj.si">international@pef.uni-lj.si</a> , +386 1 5892 347	
	3. Receiving Institution	Name	Faculty/ Department	Erasmus code (if applicable)	Address	Country	Contact person name; email; phone	
		IZPOLNITE!! Erasmus kodo vidite v svoji prijavi v VISu ali na spleti strani - bilateralne pogodbe						gl. meil z navodili tuje institucije

Before the mobility

Study Programme at the Receiving Institution

Planned period of the mobility: from [month/year] ..... to [month/year] .....

1. Vpišite čas izmenjave: OD-DO

**Table A**  
Before the mobility

Component <sup>1</sup> code (if any)	Component title at the Receiving Institution (as indicated in the course catalogue <sup>2</sup> )	Semester (e.g. autumn/spring; term)	Number of ECTS credits (or equivalent) <sup>3</sup> to be awarded by the Receiving Institution upon successful completion
Total: ...			

2. Predmeti, ki jih boste opravljali v tujini

Web link to the course catalogue at the Receiving Institution describing the learning outcomes: [web link to the relevant information]

The level of language competence<sup>4</sup> 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

3. Vpišite jezik predavanj in st. znanja

Recognition at the Sending Institution

**Table B**  
before the mobility

Component code (if any)	Component title at the Sending Institution (as indicated in the course catalogue)	Semester (e.g. autumn/spring; term)	Number of ECTS credits (or equivalent) to be recognised by the Sending Institution
Total: ...			

4. Predmeti, ki bodo pri nas priznani - v slovenščini

Provisions applying if the student does not complete successfully some educational components: [web link to the relevant information]

Commitment

By signing 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 (or the principles agreed in the Inter-institutional Agreement for Institutions located in Partner Countries). The Beneficiary Institution and the student should also commit to what is set out in the Erasmus+ grant agreement. The Receiving Institution confirms that the educational components listed in Table A are in line with its course catalogue 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 as described in Table B. Any exceptions to this rule are documented in an annex of this Learning Agreement and agreed by all parties. 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	Signature
Student			Student		
Responsible person <sup>5</sup> at the Sending Institution		international@pef.uni-ij.si	Erasmus Coordinator		
Responsible person at the Receiving Institution					

5. Vpišite svoje podatke, se podpišite ter obrazec pošljite v podpis še nam