

## ECTS - EUROPEAN CREDIT TRANSFER AND ACCUMULATION SYSTEM LEARNING AGREEMENT

## ACADEMIC YEAR 20..../20.... [ ]Autumn Semester / [ ] Spring Semester / [ ] Full Year

FIELD OF STUDY: .....

ending institution:		
DETAILS OF THE PROPOSE	D STUDY PROGRAMME ABROAD/LEA	ARNING AGREEMENT
Receiving institution: University	of Lapland, SF ROVANIE01 Country:	FINLAND
Course/ program unit code (if any) and page no. of the information package	Course/ program unit title (as indicated in the information package)	Number of ECTS credits
f necessary, continue the list on a sep	arate sheet	
Student's signature		
	Date:	
SENDING INSTITUTION	6 . 1 / 1	1
	ogramme of study/learning agreement is appro-	oved.
Coordinator's signature and stam	_	
	Date:	
RECEIVING INSTITUTION		
We confirm that the proposed pro	ogramme of study/learning agreement is appro	oved.
Coordinator's signature and stam	p	
	Date:	