

## LEARNING/TEACHING AGREEMENT

ACADEMIC YEAR..... - FIELD OF STUDY: .....

Name of student: .....	Student ID:.....
SENDING UNIVERSITY: ...The German Jordanian University	Country: .....Jordan.....

### DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD – LEARNING/TEACHING AGREEMENT

HOST UNIVERSITY: ..... Country: .....
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Course code	Course title	Number of ECTS / SWS credits at Host University	Number of credits at GJU

(if necessary, continue the list on a separate sheet)

Student's signature.....	Date: .....
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#### SENDING UNIVERSITY: GJU

We confirm that the proposed learning/teaching agreement is approved.

Name & signature Exchange Officer

Name & signature Dean of Faculty

Name & signature Head of International Office

.....  
Date:.....

.....  
Date: .....

.....  
Date: .....

#### HOST UNIVERSITY:

We confirm that the proposed learning/teaching agreement is approved.

Name & signature Departmental coordinator

Name & signature Institutional coordinator

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Date: .....

Date: .....