



Lifelong Learning Programme

UNIVERSITY of OULU
OULUN YLIOPISTO



CHANGES TO LEARNING AGREEMENT

(to be filled out only if there are changes to the original Learning Agreement)

Student information	Name of student	
	Home institution University of Oulu	Erasmus Code SF OULU01
	Duration of exchange (from – to)	Number of months
Host institution	Name	Erasmus Code

Details of the changes to Learning Agreement

Course unit (if any)	Course unit title	Deleted course unit	Added course unit	ECTS credits
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
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		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

Date and Student Signature

We confirm that the changes to the original Learning Agreement are approved.

Home institution	Departmental coordinator's signature	stamp of institution
	Date:	
Host institution	Departmental coordinator's signature	stamp of institution
	Date:	