INTERNATIONAL EXCHANGE
LEARNING AGREEMENT

Please fill out this form typed (preferred) or with a clear handwriting

Name of student:
Sending institution: Oxford Brookes University
Country: UK
Field of Study:
Oxford Brookes Semester 1 □  Semester 2 □  Whole academic year □
Brookes academic year 201_/201_

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT

Receiving institution:
Country:

<table>
<thead>
<tr>
<th>Module Code</th>
<th>Module Name</th>
<th>Equivalent Brookes Module (if applicable)</th>
<th>Compulsory Yes/No</th>
<th>Host University Credits</th>
<th>ECTS Credits</th>
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Total

if necessary, continue the list on a separate sheet

You will need to enrol for the equivalent of 30 ECTS credits (European Credit Transfer System) for one semester workload or 60 ECTS for a whole academic year.

Student’s signature:
.................................................................  Date: ..............................
We confirm that the proposed programme of study/learning agreement is approved.

**Faculty approval 1**
- Subject coordinator
- Exchange Coordinator

Signature ...............................................................

Name (typed) ............................................................

Date: ...............  
Please also add the name and contact details of a colleague to be contacted in case of annual leave/longer absence from Brookes

Name (typed): ............................................................

**Faculty approval 2 (if the student is doing combined Honours)**
- Subject coordinator
- Exchange Coordinator

Signature .................................................................

Name (typed) ............................................................

Date: ...............  
Please also add the name and contact details of a colleague to be contacted in case of annual leave/longer absence from Brookes

Name (typed): ............................................................