

Student	Last name (s)	First name (s)	Date of birth	Nationality	Sex [M/F]	Academic year	Study cycle	Subject area, Code
Sending Institution	Name ULUDAG UNIVERSITY	Faculty	Erasmus code (if applicable) TR BURSA01	Department	Address	Country, Country code Turkey,TR	Contact person name	Contact person e-mail / phone
Receiving Institution	Name	Faculty	Erasmus code (if applicable)	Department	Address	Country, Country code	Contact person name	Contact person e-mail / phone

Açıklamalı [D1]: Öğrenim kademesi

Lisans ise: 1st
Yüksek lisans ise: 2nd
Doktora ise: 3rd yazılacak

Açıklamalı [D2]: Bölümün ISCED kodu yazılacak

Study Programme at Receiving Institution				
Planned period of the mobility: from [month/year] to [month/year]				
Table A Before the mobility	Component code (if any)	Component title (as indicated in the course catalogue) at the receiving institution	Semester [e.g. autumn / spring / term]	Number of ECTS credits (or equivalent) to be awarded by the receiving institution upon successful completion
Total: ...				
Web link to the course catalogue at the receiving institution describing the learning outcomes: [web link to the relevant information]				

Açıklamalı [D3]: Gideceğiniz üniversitede alacağınız dersler aşağıdaki tabloya yazılacak. Her bir satıra bir ders yazınız. Satır sayısı yetmezse, artırabilirsiniz.

Açıklamalı [D4]: Okulun akademik takvimine göre; gideceğiniz tahmini ay/yıl ve döneceğiniz tahmini ay/yıl yazınız.

The level of language competence in _____ [the main language of instruction] that the student already has or agrees to acquire by the start of the study period is: A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> Native speaker <input type="checkbox"/>
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Açıklamalı [D5]: UÜ Erasmus başvurusu yaptığınızda kullandığınız dil puanına göre dil yeterlik seviyenizi işaretleyiniz.

Recognition at Sending Institution				
Table B Before the mobility	Component code (if any)	Component title (as indicated in the course catalogue) at the receiving institution	Semester [e.g. autumn / spring / term]	Number of ECTS credits (or equivalent) for the group of educational components in the student's degree that would normally be completed at the sending institution and which will be replaced by the study abroad
Total: ...				
Provisions applying if the student does not complete successfully some educational components: [web link to the relevant information]				

Açıklamalı [D6]: Karşı üniversitede almayı planladığınız derslerin UÜ'deki karşılıkları yazılacak. Her bir satıra bir ders yazınız. Satır sayısı yetmezse, artırabilirsiniz.

By signing this document, the student, the sending institution and the receiving institution confirm that they approve the proposed 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 sending 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 gained at the receiving institution for the successfully completed educational components and to count them towards the student's degree as described in Table C. Any exceptions to this rule are documented in an annex of this Learning Agreement and agreed by all parties. The student and receiving institution will communicate to the sending institution any problems or changes regarding the proposed mobility programme, responsible persons and/or study period.

Commitment	Name	Function	Phone number	Email	Date	Signature
Student		Student				
Responsible person at the Sending Institution		Departmental Coordinator				
Responsible person at the Receiving Institution						

Açıklamalı [D7]: Kendi bilgilerinizi doldurup "Signature" sütununa kendi imzanızı atınız.

Açıklamalı [D8]: Bölüm koordinatörünüzün bilgilerini doldurup "Signature" sütununa bölüm koordinatörünüzün imzasını alınız.