**Receiving Institution: Metropolia University of Applied Sciences / Finland**

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| --- | --- |
| Academic year: |  |
| Semester: |  |
| Field of study at Metropolia: |  |
| Student’s name: |  |
| Student’s e-mail: |  |
| Sending institution: |  |
| Country: |  |

**Details of the proposed study programme abroad / Learning Agreement**

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| --- | --- | --- |
| Course title (and possible code) |  | ECTS credits |
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| Total |  |  |

**Signatures (Metropolia will sign after application deadline):**

