**Academic year Field of study:**

**Study period: to:**

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| Name of student:Sending institution: Ivane Javakhishvili Tbilisi State UniversityCountry: Georgia |

**Details of the proposed study programme abroad**

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| Receiving institution: Country:  |

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| **Course****Code if any** | **Course title** | **Semester** | **Receiving institution credits** |  **ECTS credits** |
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| Student’s signature:....................................... Date:.................................... |

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| **Sending institution:**We confirm that the proposed programme of study/learning agreement is approvedDepartmental coordinator’s signature Institutional coordinator’s signature------------------------------------------- ---------------------------------------------Date:------------------------------------ Date: ------------------------------------- |

**Receiving institution:**

We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved

Departmental coordinator’s signature Institutional coordinator’s signature

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Date:----------------------------------- Date: -------------------------------------

**Changes to original proposed study programme/learning agreement**

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| Name of student: |
| Sending institution:Country: |

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| **Course code if any** | **Course title (as indicated in the information package)** | **Semester** | **Deleted****course unit** | **Added course unit** | **ECTS Credits** |
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| **Sending institution:**We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approvedDepartmental coordinator’s signature Institutional coordinator’s signature------------------------------------------ --------------------------------------------Date:----------------------------------- Date: ------------------------------------- |

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| **Receiving institution:**We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approvedDepartmental coordinator’s signature Institutional coordinator’s signature------------------------------------------ --------------------------------------------Date:----------------------------------- Date: ------------------------------------- |