**Academic Year:** 20..../20….  **Semester**:...............................................

**Name and Surname of the Student**: **Faculty / Department:** .......................................... ......................................................................

**Sending Institution**: .................................. **Country**:...............................................

**Receiving Institution**: Akdeniz University **Country**: Türkiye

**DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD**

|  |  |  |
| --- | --- | --- |
|  | **Courses at the Receiving Institution** | **Courses at the Sending Institution** |
| Code | Course Name | Number of ECTS Credits | Code | Course Name | Number of ECTS Credits |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
|  |  Total Credits |  |  Total Credits  |  |

|  |
| --- |
| **Student’s Name, Surname and Signature:** ............................................................ **Date:** ...../...../20..... |
| **SENDING INSTITUTION** We confirm that the proposed programme of study / learning agreement is approved. |
| **Departmental Coordinator’s Name, Surname and Signature****.............................................................................****Date:** ...../...../20..... | **Head of the International Relations Office Name, Surname and Signature****..............................................................................................****Date:** ...../...../20..... |
| **RECEIVING INSTITUTION (Akdeniz University)**We confirm that the proposed programme of study / learning agreement is approved. |
| **Departmental Coordinator’s Name, Surname and Signature****.............................................................................****Date:** ...../...../20..... | **Head of the International Relations Office Name, Surname and Signature****..................................................................................****Date:** ...../...../20..... |

\* This document should be prepared in 3 copies (for student, sending institution and receiving institution).

 It will be valid after being signed by the student and coordinators of the sending and receiving institutions.