**\*** **This form should be used by Faculty and School Students only if there is a change at Karabük University.**

**……………….………. FACULTY/VOCATIONAL SCHOOL …………….……… DEPARTMENT**

|  |
| --- |
| Student’s Name: Sending Institution : **KARABÜK UNIVERSITY**  |
| Country: TÜRKİYE Erasmus Code: **TR KARABUK01** |
| Receiving Institution: ................................. |
| Country: Erasmus Code: |
| **THE SCHEDULE OF COURSE CHANGES SPECIFIED IN THE LEARNING AGREEMENT IN RELATION TO THE COURSES IN OUR DEPARTMENT** |

| **Karabük University** | **Receiving Institution** |
| --- | --- |
| **List of courses in the Learning Agreement** | **List of courses that the student will take abroad** |
| **Course Code** | **Course Name** | **Dropped Lesson** | **Added Lesson** | **ECTS** | **Credit** | **Course Code** | **Course Name** | **ECTS** |
|  |  | 🞏 | 🞏 |  |  |  |   |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |
|  |  | 🞏 | 🞏 |  |  |  |  |  |

Total ECTS ve Credit : …… Total ECTS : ………

|  |
| --- |
| **Student’s Signature: ........................................ Date: .....................................** |
| According to paragraph C of Article 1 of the Erasmus Declaration **"Full recognition must be given to students for courses specified in the Learning Agreement, which student have taken and passed"**, it has been decided that if the student is successful in the courses in the Learning Agreement, the course or courses opposite the relevant course will be considered successful. |
| **Erasmus+ Departmental Coordinator Head of the Department Erasmus+ Institutional Coordinator**  ………………………………… ……………………………. ……………………………. Signature Signature Signature … /… / … … /… /… … /… /20… |