



Student name :

FK:

## II. CHANGES TO THE ORIGINAL LEARNING AGREEMENT

New Table B, if changes were necessary.

(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)

Component code (if any)	Component title (as indicated in the course catalogue) at the sending institution		Component title (as indicated in the course catalogue) at the receiving institution	Semester [autumn / spring] [or term]	Number of ECTS credits
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			
		↔			Total:

**Responsible person in the sending institution  
(Vorsitzende/r der Prüfungskommission):**

Name:

Signature:

Date:

### III. CHANGES IN THE RESPONSIBLE PERSON(S), if any:

**New responsible person in the sending institution:**

Name:

Function:

Phone number:

E-mail:

**New responsible person in the receiving institution:**

Name:

Function:

Phone number:

E-mail: