

LEARNING AGREEMENT- INCOMING STUDENT

Students must scan /submit this (signed) document to the International Services and Programs Office.

Name of Student:	
LAU Student ID Number:	Nationality:
Student's E-mail Address:	
Name of Home University:	Country of Home University:
Major:	Semester(s) to be spent at LAU:
Level of Mobility:	Campus:
Phone Number:	Date of Arrival:

DETAILS OF PROPOSED EXCHANGE/ STUDY ABROAD PROGRAM

	CRN	Subject	Course Number	Title	Number of Credits
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Full Name of Host University Coordinator:	
SIGNATURE:	DATE: / / <small>Day Month Year</small>
Full Name of Home University Coordinator:	
SIGNATURE:	DATE: / / <small>Day Month Year</small>
Name of the Student:	
SIGNATURE:	DATE: / / <small>Day Month Year</small>