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| Lernvereinbarung • Learning Agreement | | | | | | | | |
| 1. DATEN BEWERBER/IN • *DETAILS APPLICANT* | | | | | | | | |
| Name  *Surname/Family name* | | |  | | Vorname(n)  *First/Given name(s)* | |  | |
| Matrikelnummer  *Student number* | | |  | | Geburtsdatum  *Date of birth* | |  | |
| E-Mail-Adresse  *E-mail address* | | |  | | Telefonnummer  *Phone number* | |  | |
| Studiengang an der EAH Jena  *Course of study at EAH Jena* | | |  | | | | | |
| 1. ANGABEN ZUR GASTHOCHSCHULE • *DETAILS RECEIVING INSTITUTION* | | | | | | | | |
| Name der Gasthochschule  *Name of receiving institution* | | |  | | | | | |
| Geplanter Aufenthaltszeitraum  *Intended period of stay* | | |  | | | | | |
| Gewünschter Studiengang  *Envisaged study programme* | | |  | | | | | |
| 1. ANSPRECHPARTNER/IN AN DER GASTHOCHSCHULE • *CONTACT PARTNER AT RECEIVING INSTITUTION* | | | | | | | | |
| Name  *Surname/Family name* | | |  | | Vorname(n)  *First/Given name(s)* | |  | |
| E-Mail-Adresse  *E-mail address* | | |  | | Telefonnummer  *Phone number* | |  | |
| 1. AUSWAHL DER FÄCHER • *SELECTION OF COURSES* | | | | | | | | |
| Modulnummer  *Course code* | Modulname (wie im Modulkatalog angegeben)  *Course title (as indicated in the course catalogue)* | | | | | Semester  *Term* | | Anzahl der ECTS-Punkte  *Number of ECTS credits* |
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| Summe ECTS-Punkte  *Total ECTS credits* | | | | | | | |  |
| 1. UNTERSCHRIFT BEWERBER • *SIGNATURE APPLICANT* | | | | | | | | |
| Ort und Datum • *Place and date* | | |  | | Unterschrift • *Signature* | |  | |
| 1. ERKLÄRUNG • *COMMITMENT* | | | | | | | | |
| Hiermit wird bestätigt, dass die vorgeschlagene Lernvereinbarung von den unterzeichnenden Personen genehmigt wurde.  *Herewith is confirmed that the proposed learning agreement has been approved by the undersigned parties.* | | | | | | | | |
| **Institution** | | **Funktion • *Function*** | | **Name** | | **Datum & Unterschrift • *Date & signature*** | | |
| **EAH Jena** | | Fachbereichskoordinator  *Departmental coordinator* | |  | |  | | |
| **Gasthochschule**  ***Receiving institution*** | | Fachbereichskoordinator  *Departmental coordinator* | |  | |  | | |