



## LEARNING AGREEMENT

| Student         | Last Name (s) | First Name (s)    | Date of Birth | Nationality                 | Gender (F/M) |
|-----------------|---------------|-------------------|---------------|-----------------------------|--------------|
|                 |               |                   |               |                             |              |
| Home University | Name          | School/Department | Country       | Contact Person (name, mail) | Address      |
|                 |               |                   |               |                             |              |

### STUDY PROGRAM AT UNIVERSIDAD AUSTRAL

Period of the mobility from (month/year) \_\_\_\_\_ to (month/year) \_\_\_\_\_

| Course title at Universidad Austral | School at Universidad Austral |
|-------------------------------------|-------------------------------|
| 1-                                  |                               |
| 2-                                  |                               |
| 3-                                  |                               |
| 4-                                  |                               |
| 5-                                  |                               |
| 6-                                  |                               |
| 7-                                  |                               |
| 8-                                  |                               |
| 9-                                  |                               |
| 10-                                 |                               |



| <b>STUDENT'S LANGUAGE SKILLS</b>                                                        |                          |    |
|-----------------------------------------------------------------------------------------|--------------------------|----|
| The <b>language of instruction</b> in my proposed study program is: (please select)     | English / Spanish / Both |    |
| I <b>have this skill</b> at present in this language of instruction (choose your level) | A1                       | A2 |
|                                                                                         | B1                       | B2 |
|                                                                                         | C1                       | C2 |
|                                                                                         | Native Speaker           |    |

|                                                   |                |            |
|---------------------------------------------------|----------------|------------|
| Do you want to take Spanish as a Second Language? | Yes / No       |            |
| Indicate your current level of Spanish            | A1             | A2         |
|                                                   | B1             | B2         |
|                                                   | C1             | C2         |
|                                                   | Native Speaker | No Spanish |

**COMMITMENT - BEFORE MOBILITY**

By signing this document, the student, the Sending Institution and the Receiving Institution confirm that they approve the Learning Agreement and that they will comply with all the arrangements agreed by all parties. The student and the Receiving institution will communicate to the Sending Institution any problems or changes regarding the study program, responsible persons, and/or study period.

| COMMITMENT                                       | NAME | EMAIL | POSITION | DATE | SIGNATURE |
|--------------------------------------------------|------|-------|----------|------|-----------|
| <b>Student</b>                                   |      |       |          |      |           |
| <b>Responsible person at Home University</b>     |      |       |          |      |           |
| <b>Responsible person at Universidad Austral</b> |      |       |          |      |           |