





UNIVERSITÀ  
CATTOLICA  
del Sacro Cuore

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UCSC INTERNATIONAL  
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**Academic Year 2011/12  
LEARNING AGREEMENT  
(2)**

Name of student:

Name ..... Surname .....

Student's signature: ..... Date: .....

SENDING INSTITUTION

We confirm that the proposed programme of study/learning agreement is approved.

Departmental /Institutional coordinator's signature

Stamp

.....

Date: .....

RECEIVING INSTITUTION

We confirm that this proposed programme of study/learning agreement is approved.

Departmental /Institutional coordinator's signature

Stamp

.....

Date: .....