Universitat de les Illes Balears | Servei de Relacions Internacionals

CONTRACTE D'ESTUDIS PREVI / LEARNING EGREEMENT
CURS ACADÈMIC / ACADEMIC YEAR 20_____ - 20_____

Dades de l'estudiant / Students personal data

Planned period of the mobility: from [month/year] ____ till [month/year] ____

Llinatges/Family name			Nom/First Name		DNI/ID Card		
Adreça de mail/Email address		Estudis/Study cicle		Language competence	☐A1 ☐A2 ☐B1 ☐B2 ☐C1 ☐C2		

Universitat d'acollida / The Host Institution

University of the Balearic Islands E PALMA01	Facultat/Faculty:		Adreça/Address	Ctra de Valldemossa, Km 7.5 07122 Palma. Spain	Persona de contacte/Contact person	Ricardo Sagrera Gazeley, Head of the International Relations Office. convenis.intercanvi@uib.es	

Universitat d'origen / The Sneding Institution

	Facultat/Faculty:		Adreça/Address		Persona de contacte/Contact person		

UNIVERSITAT D'ACOLLIDA / HOST UNIVERSITY – Table A: Study programme abroad					**UNIVERSITAT DE LES ILLES BALEARS – Table B : Study programme at the UIB**				
Codi / code	Assignatura / Course title (as indicated in the course catalogue)	Semester [autumn / spring]	ECTS		Codi / code	Assignatura / Course title (as indicated in the course catalogue)	Semester [autumn / spring]	ECTS	Recognition desired/Amb reconeixement[3]
		Total					Total:		

Signatura de l'estudiant / Student's signature..... Data / Date:.....

UNIVERSITAT D'ACOLLIDA / HOST UNIVERSITY	**UNIVERSITAT DE LES ILLES BALEARS**
Departamental coordinator signature and name .....Date:	Nom i signatura del coordinador de mobilitat..... Date : .....
Institutional coordinator name, signature and seal .....Date:	International Relations Office signature ..... .Date: .....