

LEARNING AGREEMENT – OUTGOING

NB: THIS FORM NEEDS TO BE COMPLETED AND SIGNED BY THE STUDENT AND PROGRAM COORDINATOR PRIOR TO APPLYING TO THE HOST INSTITUTION.

THE STUDENT MUST SUBMIT THE SIGNED COPY OF THIS FORM ALONG WITH THE TRANSCRIPTS FROM THE HOST INSTITUTION UPON COMPLETION OF THEIR SEMESTER ABROAD TO THE REGISTRAR'S OFFICE.

ACADEMIC YEAR & SEMESTER OF EXCHANGE:

DEGREE PROGRAM:

Name of student:	Date of birth:
Humber Student Number:	Applying for OSAP? <input type="checkbox"/> YES <input type="checkbox"/> NO
Period of study (dates) From:	To:

DETAILS OF THE PROPOSED STUDY PROGRAM ABROAD / LEARNING AGREEMENT

Receiving institution:	Country:
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Course Rank	Course unit Code	Course unit title (as indicated in the course list)	Semester	Number of credits	Humber Equivalent
1					
2					
3					
4					
5					
6*					
7*					

Student's signature	Date
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SENDING INSTITUTION	
We confirm that this proposed program of study / learning agreement is approved.	
Academic Advisor's signature (Core Credits)	Date
Academic Advisor's signature (Elective Credits)	Date

FOR OFFICE USE ONLY

- Academic study plan attached
- Academic transcript received from Host Institution (after exchange semester/summer program)
- Semester Abroad**
- IBS 315 Exchange Semester course (no online breadth electives required)
- IBS 312 Exchange Semester course (one online breadth elective required)
- IBS 309 Exchange Semester course (two online breadth electives required)
- Summer Program Aroad**
- Transfer Credit Application form & fees received

To be filled in ONLY if appropriate:

Name of student:	Date of birth:
Humber Student Number:	

CHANGES TO ORIGINAL PROPOSED STUDY PROGRAM/ LEARNING AGREEMENT

Course unit code	Course unit title (as indicated in the course list)	Deleted course unit	Added course unit	Number of credits	Humber Course Equivalent

If necessary, continue this list on separate sheet

Student's signature	Date
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SENDING INSTITUTION	
We hereby confirm that the above-listed changes to the initially agreed program of study / learning agreement are approved.	

Academic Advisor's signature (Core Credits)	Date
Academic Advisor's signature (Elective Credits)	Date