



Università
Ca' Foscari
Venezia

– International Office, Ca' Foscari, Dorsoduro 3246, 30123 Venice, Italy –

EU-SWISS MOBILITY PROGRAMME
LEARNING AGREEMENT FOR RESEARCH ACTIVITIES

Please fill in the form and get it signed first by the sending University and then by the hosting University. The student has also to submit a scanned copy of the form to the International Office of Ca' Foscari University of Venice within 15 days from the end of the mobility period.

DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT
Research activities for the degree thesis

Academic year	_____	Semester	_____	Matriculation number	_____
Student's name	_____	Student's surname	_____		
Field of study	_____				
Sending institution	Università Ca' Foscari Venezia		Country	Italy	

Hosting Institution _____ Country Switzerland

Description of the research activities for the degree thesis:

Student's signature _____ Date (dd/mm/yyyy) _____

SENDING INSTITUTION:	
We confirm that the proposed learning agreement is approved.	
_____ Departmental Coordinator's signature	_____ Date (dd/mm/yyyy)
HOSTING INSTITUTION:	
We confirm that the proposed learning agreement is approved.	
_____ Departmental Coordinator's signature	_____ Date (dd/mm/yyyy)