UNIVERSITÀ
DEGLI STUDI
DI PADOVA

LEARNING AGREEMENT FOR STUDIES

The Student

Last name (s)		First name (s)	
Date of birth		Nationality	ITALIAN
Sex[M/F]	M	Academic year	2015/2016
Study cycle	First cycle degree	Subject area	Nursing and midwifery
Phone		E-mail	

The Sending Institution

Name	Università degli Studi di PADOVA	Faculty	
Erasmus code	I PADOVA01	Department	DEPARTMENT OF MEDICINE
Address	Via 8 Febbraio, 2, 35122, Padova	Country	Italy
Contact person name	FANTON ELENA	Contact person e-mail/phone	elena.fanton.1@unipd.it /

The Receiving Institution

Name	UNIVERSITAT DE LLEIDA	Faculty	
Erasmus code	E LLEIDA01	Department	
Address	LLEIDA	Country	Spain
Contact person name		Contact person e-mail/phone	/

I. PROPOSED MOBILITY PROGRAMME

Planned period of the mobility: from 01/03/2016 till 28/06/2016

Table A: Study programme abroad.

Component code	Component title	Semester	ECTS credits
005	ASSISTENZA DOMICILIARE		5
006	ASSISTENZA GERIATRICA		6
003	ASSISTENZA IN AREA CHIRURGICA		5
004	ASSISTENZA IN CARDIOLOGIA E NEUROLOGIA		6
007	SEMINARIO SU TERAPIA COMPLEMENTARE		7
		Total:	29

Web link to the course catalogue at the receiving institution at the receiving institution describing the learning outcomes:

[Web link(s) to be provided.]

Table B: Group of educational components in the student's degree that would normally be completed at the sending institution and which will be replaced by the study abroad NB no one to one match with Table A is required.
Where all credits in Table A are recognised as forming part of the programme at the sending institution without any further conditions being applied, Table B may be completed with a reference to the mobility window (see guidelines)

Component code	Component title	Semester	ECTS credits
MEL1005424	TIROCINIO (TERZO ANNO)		22
		Total:	22

If the student does not complete successfully some educational components, the following previsions will apply:

http://www.unipd.it/node/2847 delibera SA 9/6/2014

Language competence of the student

The level of language competence in_____ [the main language of instruction] that the student already has or agrees to acquire by the start of the study period is:

[A1] [A2] [B1] [B2] [C1] [C2]

[i] For the Common European Framework of Reference for Languages (CEFR) see

"http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr"

Erasmus+

II. RESPONSIBLE PERSONS

Responsible person in the sending institution	
Name: ZANOTTI RENZO	Function: Academic person Responsible for mobility
Phone number:	E-mail: renzo.zanotti@unipd.it

Responsible person in the receiving institution	
Name:	Function:
Phone number:	E-mail:

III. COMMITMENT OF THE THREE PARTIES

By signing this document, the student, the sending institution and the receiving institution confirm that they approve the proposed Learning Agreement and that they will comply with all the arrangements agreed by all parties. Sending and receiving institutions undertake to apply all the principles of the Erasmus Charter for Higher Education relating to mobility for studies (or the principles agreed in the inter-institutional agreement for institutions located in partner countries).

The receiving institution confirms that the educational components listed in Table A are in line with its course catalogue.

The sending institution commits to recognise all the credits gained at the receiving institution for the successfully completed educational components and to count them towards the student's degree as described in Table B. Any exceptions to this rule are documented in an annex of this Learning Agreement and agreed by all parties.

The student and receiving institution will communicate to the sending institution any problems or changes regarding the proposed mobility programme, responsible persons and/or study period.

The student	
(1)	Date: 22/10/2015

The sending institution	
ZANOTTI RENZO	
(1)	Date:

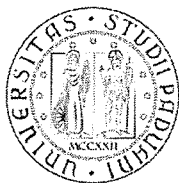| The receiving institution	
	Date:

(1) Confirmed with electronic signature under SAML 2.0 protocol. To verify the validity of the signature please refer to: erasmus@unipd.it

Erasmus+ LLEIDA

UNIVERSITÀ DEGLI STUDI DI PADOVA

LEARNING AGREEMENT FOR STUDIES

The Student

Last name (s)		First name (s)	
Date of birth	—	Nationality	ITALIAN
Sex[M/F]	M	Academic year	2015/2016
Study cycle	First cycle degree	Subject area	Nursing and midwifery
Phone		E-mail	

The Sending Institution

Name	Università degli Studi di PADOVA	Faculty	
Erasmus code	I PADOVA01	Department	DEPARTMENT OF MEDICINE
Address	Via 8 Febbraio, 2, 35122, Padova	Country	Italy
Contact person name	FANTON ELENA	Contact person e-mail/phone	elena.fanton.1@unipd.it /

The Receiving Institution

Name	UNIVERSITAT DE LLEIDA	Faculty	
Erasmus code	E LLEIDA01	Department	
Address	LLEIDA	Country	Spain
Contact person name		Contact person e-mail/phone	/

Erasmus+

I. PROPOSED MOBILITY PROGRAMME

Planned period of the mobility: from 15/02/2016 till 14/06/2016

Table A: Study programme abroad.

Component code	Component title	Semester	ECTS credits
005	ASSISTENZA DOMICILIARE		
003	ASSISTENZA IN AREA CHIRURGICA		
004	ASSISTENZA IN CARDIOLOGIA E NEUROLOGIA		
001	CONSERVATION AND MUSEOGRAPHY		
007	SEMINARIO SU TERAPIA COMPLEMENTARE		
		Total:	0

Web link to the course catalogue at the receiving institution at the receiving institution describing the learning outcomes:

[Web link(s) to be provided.]

Table B: Group of educational components in the student's degree that would normally be completed at the sending institution and which will be replaced by the study abroad NB no one to one match with Table A is required. Where all credits in Table A are recognised as forming part of the programme at the sending institution without any further conditions being applied, Table B may be completed with a reference to the mobility window (see guidelines)

Component code	Component title	Semester	ECTS credits
MEP3053071	GESTIONE DEL RISCHIO CLINICO IN CHIRURGIA		3
		Total:	3

If the student does not complete successfully some educational components, the following previsions will apply:

http://www.unipd.it/node/2847 delibera SA 9/6/2014

Language competence of the student

The level of language competence in_____ [the main language of instruction] that the student already has or agrees to acquire by the start of the study period is:

[A1] [A2] [B1] [B2] [C1] [C2]

[i] For the Common European Framework of Reference for Languages (CEFR) see

"http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr"

II. RESPONSIBLE PERSONS

Responsible person in the sending institution	
Name: ZANOTTI RENZO	Function: Academic person Responsible for mobility
Phone number:	E-mail: renzo.zanotti@unipd.it

Responsible person in the receiving institution	
Name:	Function:
Phone number:	E-mail:

III. COMMITMENT OF THE THREE PARTIES

By signing this document, the student, the sending institution and the receiving institution confirm that they approve the proposed Learning Agreement and that they will comply with all the arrangements agreed by all parties. Sending and receiving institutions undertake to apply all the principles of the Erasmus Charter for Higher Education relating to mobility for studies (or the principles agreed in the inter-institutional agreement for institutions located in partner countries).

The receiving institution confirms that the educational components listed in Table A are in line with its course catalogue.

The sending institution commits to recognise all the credits gained at the receiving institution for the successfully completed educational components and to count them towards the student's degree as described in Table B. Any exceptions to this rule are documented in an annex of this Learning Agreement and agreed by all parties.

The student and receiving institution will communicate to the sending institution any problems or changes regarding the proposed mobility programme, responsible persons and/or study period.

The student	
(1)	Date: 28/10/2015

The sending institution	
ZANOTTI RENZO	
(1)	Date:

The receiving institution	
	Date:

(1) Confirmed with electronic signature under SAML 2.0 protocol. To verify the validity of the signature please refer to: erasmus@unipd.it