**LEARNING AGREEMENT FOR STUDIES**

 **Autumn 2022-2023** (01-09-2022 – 31-01-2023)

**The Student**

|  |  |  |  |
| --- | --- | --- | --- |
| Last name (s) |  | First name (s) |  |
| Date of birth |  | Nationality |  |
| Sex [*M/F*] |  | Academic year | 2022 - 2023 |
| Study cycle |  | Subject area,Code |  |
| Phone |  | E-mail |  |

**The Sending Institution**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Faculty |  |
| Erasmus code (if applicable) |  | Department |  |
| Address |  | Country,Country code |  |
| Contact person name |  | Contact persone-mail / phone |  |

**The Receiving Institution**

|  |  |  |  |
| --- | --- | --- | --- |
| Name  | Windesheim University of AppliedSciences | Faculty | Health & Welfare |
| Erasmus code (if applicable) | NL ZWOLLE 05 | Department | Health & Welfare |
| Address | Campus 2-6 | Country,Country code | The Netherlands, NL |
| Contact personname | Mr. Sven Wierda | Contact persone-mail / phone | international.hcsw@windesheim.nl+31884696237 |

#### **Section to be completed BEFORE THE MOBILITY**

**I. PROPOSED MOBILITY PROGRAMME autumn 2022-2023**

**Student name:**

**MODULE NAME: Social Community Design**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **tick if applicable** | **Component code** (if any) | **Component title** (as indicated in the course catalogue) at the receiving institution | **Block** | **Number of ECTS credits** (to be awarded by the receiving institution upon successful completion) | **Obligatory** Yes/No |
| [x]  | SCD.MHR.21  | Mental Health & Resilience  | 1 | 5 | yes |
| [x]  | SCD.SHB.21 | Sustainable Healthy Behavior | 1  | 5 | yes |
| [x]  | SCD.TGP.21 | The Global Professional | 1 and 2  | 5 | yes |
| [x]  | SCD.IEP.21  | Innovation and Entrepreneurship Project | 1 and 2  | 15 | yes |
| *Cross-departmental Modules (Electives):* |
|

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [x]  | EN-IN-WNID | Windesheim and the Netherlands, introduction module of several Dutch aspects analysed in an international perspective | 1 and 2 | 2 | No |
| [ ]  | EN-IN-DLID | Dutch Language 1: Introduction | 1  | 3 | No |
| [ ]  | EN-IN-DLIM | Dutch Language 2: Intermediatea | 2  | 3 | No |
| [ ]  | EN-IN-DSID | Dutch Society 1 | 1 | 3 | No |
| [ ]  | EN-IN-DSIM | Dutch Society 2 | 2  | 3 | No |
| [ ]  | BE-IOE.IA | Intercultural Awarenessb | 1  | 3 | No |
| [ ]  | EN-IN-DRIM | Drama & Improvisationc | 2 | 3 | No |
|  |  | **TOTAL ECTS:** |  |       |  |

a Dutch Language 2: Prerequisite for taking this course: Dutch Language 1b Intercultural Awareness : this class will only take place if there are at least 8 participating students, (a maximum of 30 students)c Drama & Improvisation : this class will only take place if there are at least 8 participating students, (a maximum of 30 students) |

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

|  |
| --- |
| *http://www.windesheiminternational.nl/study-programmes/exchange-programmes/* |

**II. 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 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**Student’s name:Student’s signature: Date:  |

|  |
| --- |
| **The sending institution**Responsible person (name):Responsible person’s signature: Date: Stamp: |

|  |
| --- |
| **The receiving institution** (Windesheim University of Applied Sciences)Responsible person (name): Mr. Sven WierdaResponsible person’s signature: Date: Stamp: |