

**Academic year 2012/2013 - Study period: (dates) from    /    /    to    /    /**

**Field of study:**

CODE ISCED:

Full name:

Name of Student: \_\_\_\_\_ Mrs ☐ / Mr ☐  
(Sur- Last- Family Name //First - Given Name)

Sending Institution **HAROKOPIO UNIVERSITY (CHAROKOPEIO PANEPISTIMIO)**

Country	<b>GREECE</b>
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Institution's Erasmus ID CODE:	<b>G KALLITH01</b>
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## DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT

**Receiving Institution:**

Country

Institution's Erasmus ID CODE:

Course unit code (if any) and page no. of the course catalogue	Course unit title (as indicated in the course catalogue)	Semester W= Winter S= Spring	Number of ECTS credits
<b>TOTAL OF ECTS CREDITS:</b>			

*if necessary, continue the list on a separate sheet*

**Fair translation of grades must be ensured and the student has been informed about the methodology**

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Student's name & Signature: \_\_\_\_\_

Date:

**SENDING INSTITUTION**

**We confirm that the proposed programme of study/learning agreement is approved.**

Departmental coordinator's Name &amp; signature

Institutional coordinator's Name &amp; signature

G. DEDOUSSIS –Assoc. Prof. at the Department  
of Nutrition and Dietetics.

Date:

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Date:

**RECEIVING INSTITUTION****We confirm that the above proposed programme of study/learning agreement is approved.**

Departmental coordinator's Name & signature:	Institutional coordinator's Name & signature:
Date:	Date:

Name of Student:

Sending Institution: **HAROKOPIO UNIVERSITY (CHAROKOPEIO PANEPISTIMIO)**

Country	GREECE	Institution's Erasmus ID CODE:	G KALLITH01
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**CHANGES****TO ORIGINAL PROPOSED STUDY PROGRAMME/LEARNING AGREEMENT**

(to be filled in ONLY if appropriate)

Course unit code (if any) and page no. of the course catalogue	Semester or Period	Course unit title (as indicated in the course catalogue)	Deleted Course Unit	Added Course Unit	Number of ECTS credits
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
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			<input type="checkbox"/>	<input type="checkbox"/>	
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			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
<b>TOTAL OF ECTS Credits:</b>			deleted	added	-----

*If necessary, continue this list on a separate sheet***Fair translation of grades must be ensured and the student has been informed about the methodology**

Student's name & Signature:	
Date:	

**SENDING INSTITUTION****We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.**

Departmental coordinator's Name & signature	Institutional coordinator's Name & signature
  	G. DEDOUSSIS, Assoc. Prof. at the Dept of Nutrition and Dietetics
Date:	Date:

**RECEIVING INSTITUTION :****We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved.**

Departmental coordinator's Name & signature	Institutional coordinator's Name & signature
Date:	Date: