International Study Programme
Environmental and Resource Management

Brandenburg University of Technology Cottbus

Preliminary Learning Agreement

Semester (abroad): _____ Date: _____

Matriculation number: _____ Study Programme: B.Sc. ☐

M.Sc. ☐

Surname: _____ First name: _____

Address: _____

Phone: _____ E-mail: _____

Home country: _____

Support programme: Yes ☐ No ☐ Which? _____

Place/country where you will carry out your semester abroad: _____

Name of the university: _____

Is this a partner university? Yes ☐ No ☐

Date of departure: _____ Duration of stay: _____

Proposed programme of study			
Course code	Course title	HPW / Credits abroad	Credits BTU

Hereby I declare that I will hand in a short report and filled questionnaire about my semester abroad within three month after the completion of my semester abroad.

_____ _____

Signature of student Signature of Head of Examination Board