

## Learning Agreement- Incoming Student

**Lebanese American University**

**Students must scan/ submit this (signed) document to the Study Abroad & International Exchange Office.**

Name of student	Student ID
Student's e-mail address	Nationality
Name and country of home university	Date of arrival
Field/major of current study and School	Semester(s) to be spent at the host university
Level of Mobility	Phone number

DETAILS OF PROPOSED EXCHANGE/ STUDY ABROAD PROGRAM		
Course Title	Course Number	Number of credits

Name of the host university coordinator:	Date: Signature:
Name of the home university coordinator:	Date: Signature:
Name of the Student:	Date: Signature: