**LEARNING AGREEMENT**

**ACADEMIC YEAR 2024/2025 – FIELD OF STUDY: Russian as a foreign language**

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| Name of student: Wang Irui/ Ван Ижуй.Sending institution: Mudanjiang Normal University Country: China |

**DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING AGREEMENT**

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| Receiving institution: Tomsk State Pedagogical University Country: Russia |

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| Course unit code (if any)  | Course unit title  | Number of credits |
| Б1.О.06.03 | Грамматика русского языка | 5 |
| Б1.О.06.06 | Основы лингвистических знаний | 3 |
| Б1.О.06.01 | Практика речи русского языка | 2 |
| Б1.О.06.02 | Фонетика русского языка | 2 |
| Б1.О.04.02 | Психология | 5 |
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if necessary, continue the list on a separate sheet

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| Student’s signature ...............................................................................Date: ....................................... |

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| **SENDING INSTITUTION**We confirm that the proposed programme of study/learning agreement is approved. |
| Departmental coordinator’s signature.............................................................................Date: ................................................................... | Institutional coordinator’s signature...................................................................................Date: ................................................................................ |

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| **RECEIVING INSTITUTION**We confirm that this proposed programme of study/learning agreement is approved. |
| Departmental coordinator’s signature..............................................................................Date: ................................................................... | Institutional coordinator’s signature...................................................................................Date: ................................................................................. |

**CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME/LEARNING AGREEMENT**

(to be filled in ONLY if appropriate)

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| Course unit code (if any)  | Course unit title  | Deletedcourseunit | Addedcourseunit | Number of Credits |
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| Student’s signature.......................................................................................... Date: ...................................................................... |

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| **SENDING INSTITUTION**We confirm that the above-listed changes to the initially agreed programme of study/learning agreement are approved. |
| Departmental coordinator’s signature........................................................................Date: .................................................................... | Institutional coordinator’s signature..................................................................................Date: ................................................................................ |

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| **RECEIVING INSTITUTION**We confirm bye the above-listed changes to the initially agreed programme of study/learning agreement are approved. |
| Departmental coordinator’s signature........................................................................Date: .................................................................... | Institutional coordinator’s signature...................................................................................Date: ................................................................................. |