



Education and Culture DG

Lifelong Learning Programme

visoka šola za tehnologijo polimerov



polymer technology college



SENDING INSTITUTION

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

Departmental coordinator's signature:

Intitutional coordinator's signature:

Date: _____

Date: _____

RECEIVING/HOST INSTITUTION

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

Departmental coordinator's signature:

Intitutional coordinator's signature:

Date: _____

Date: _____

Name of student: _____

Sending institution: _____

Country: _____