Registration of a new Erasmus+ course

INTERNATIONAL PSYCHOANALYTIC UNIVERSITY BERLIN

IPU Course information

Study Course: (Please Choose)

Module number and name:

Course name:

Worload in ECTS: Course type: (Please choose)

Requirements for participation: Semester offered:

Course content description:

Learning Outcomes:

Teaching methods:

Examination methods:

Partner University Course information

Partner university:

Degree course: Level of studies:

Department/faculty:

Course name: Worload in ECTS:

Requirements for participation:

Course content description:

Learning outcomes:

Teaching methods:

Examination methods:

I hereby request that the above mentioned course be recognized for my Erasmus+ study abroad semester:

Student Name:

Place, date

Student's Signature

The course has been approved for the Erasmus+ exchange: Yes No

Academic advisor signature