

Temporary Learning Agreement

First Name	Last Name	Matricule UdeM
Program at UdeM	Program Number	Academic Coordinator
Host Country	Host Institution	Faculty or Department at Host Institution

I have read the information on [the learning agreement \(contrat d'études\)](#).

Temporary course selection at host institution			Credit transfer seeked at UdeM				
Semester abroad (Example : September 2016 to January 2017) : _____			Fall Semester OR Winter Semester				
Course Code	Course Title	Credits or Hours	Course Code	Course Title	Credits		
					Compulsory	Optional	Elective
TOTAL CREDITS OR HOURS ABROAD			TOTAL CREDITS UDEM				

Academic coordinator's signature: _____ Date: _____

Student's signature: _____ Date: _____

ALTERNATIVE COURSE CHOICE

First Name	Last Name	Matricule UdeM
Program at UdeM	Program Number	Academic Coordinator
Host Country	Host Institution	Faculty or Department at Host Institution

Alternative course choice (in the event that the courses listed above are not available) Semester abroad (Example : September 2016 to January 2017) : _____			Alternative credit transfer UdeM Fall Semester OR Winter Semester				
Course Code	Course Title	Credits or Hours	Course Code	Course Title	Credits		
					Compulsory	Optional	Elective

Academic coordinator's signature: _____ Date: _____

Student's signature: _____ Date: _____