



# ÉCOLE SPECIALE D'ARCHITECTURE LEARNING AGREEMENT

## PERSONAL INFORMATION

Name : .....

Firstname : .....

Nationality : .....

Date and place of birth : .....

## STUDY INFORMATION

Study level (semester number) : .....

Indicate exchange period : (semester/year) : .....

Length of study : .....

## LEARNING PROGRAM

Credit	Academic Dicipline	Semester	Teacher	Number of credits
	Cours de français			
	Histoire de Paris			

**Home University**

Coordinator signature :

**Student**

Student signature :

**Ecole Spéciale d'Architecture**

Coordinator signature :

*During your semester at the Ecole Speciale d'Architecture you have to valid 30 credits.*