



ISTANBUL AYDIN UNIVERSITY  
INTERNATIONAL ACADEMIC RELATIONS DEPARTMENT

## EXCHANGE STUDENT LEARNING AGREEMENT

Name of Student	FULL NAME OF THE STUDENT		
Sending Institution	NAME OF THE UNIVERSITY		
Country	COUNTRY		
Institute/Faculty/School	FACULTY		
Department	DEPARTMENT		
Study Period	FALL OR SPRING	Academic Year	2024-2025

### Details of the Proposed Study Programme Abroad/Learning Agreement:

#### Home Institution

Course Unit Code	Course unit title	Number of Local Credits	Number of ECTS credits
COURSE CODE	COURSE NAME	Number of Local Credits	Number of ECTS credits
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COURSE CODE	COURSE NAME	Number of Local Credits	Number of ECTS credits
COURSE CODE	COURSE NAME	Number of Local Credits	Number of ECTS credits
COURSE CODE	COURSE NAME	Number of Local Credits	Number of ECTS credits
COURSE CODE	COURSE NAME	Number of Local Credits	Number of ECTS credits

Total:

#### Host Institution

BUS417	Business Planning	3	4
BUS341	Project Design	3	4
ECO491	Managerial Economics	3	5
BUS403	Applied Workshop for Business-1	3	5
BUS442	Brand Management	3	4
BUS452	Project Management	3	4

Total:

18

26

Student's Signature:

Date:

HOME INSTITUTION: We confirm that this programme of study/learning agreement is approved.

Department Head's Signature  
(Name Surname/Signature/Date)

International Relations Head's Signature  
(Name Surname/Signature/Date)

HOST INSTITUTION: We confirm that this programme of study/learning agreement is approved.

Department Head's Signature  
(Name Surname/Signature/Date)

International Relations Head's Signature  
(Name Surname/Signature/Date)