

**STUDENT MOBILITY EXECUTIVE PROTOCOL
BETWEEN THE FACULTY OF**

OF ROMA TRE UNIVERSITY

AND THE FACULTY OF

OF THE UNIVERSITY OF _____

The Faculty of _____ of Roma Tre University, represented by the Dean, prof. _____ and the Faculty of _____ of the University of _____, represented by the Dean, prof. _____, under the terms of the Framework Cooperation Agreement signed on the _____ and in particular pertaining Area of Interest No. 2 identified as “Co-operation in the study programmes of the students enrolled in both Institutions”, the parties agree to the following:

Article 1

The Faculty of _____ of the University of _____ will admit n° _____ of students of the Faculty of _____, Roma Tre University, to pursue courses for n° _____ semesters, waiving application fees, course tuition and registration fees covering the duration of the exchange.

The Faculty of _____ of Roma Tre University _____ will admit n° _____ of students of the Faculty of _____, of the University of _____, to pursue courses for n° _____ semesters, waiving application fees, course tuition and registration fees covering the duration of the exchange.

The Academic Year at Roma Tre University is organised in two semesters (October – January and March – June). Exams following the first semester are held in the month of _____ year _____. Exams following the second semester are held in the month of _____ year _____.

The Academic Year at _____ University is organised in n° _____ semesters (*specify beginning and ending dates for all semesters*). Exams following the first semester are held in the month of _____ year _____. Exams following the second semester are held in the month of _____ year _____.

Article 2

The students, nominated by ad hoc committees of the Faculties involved, will be admitted to pursue the courses described in the Learning Agreement negotiated and approved by the parties involved (enclosures B and C of this student mobility executive protocol).

Neither party will discriminate on the basis of race, colour, religion, sex, sexual orientation, age, disability, military status, national origin, etc. The parties commit to guaranteeing the participation of differently able people to the mobility programmes.

Admission requirements and criteria as well as the names and contact details of the administrative reference person and of the academic coordinator/tutor are described in detail in enclosure A.

Both parties commit to certificate course frequency and exams, to recognise the studies and the credits pursued by students in the receiving university as well as to grant access to the students to all services and facilities generally offered by the receiving university.

Article 3

Participating students of both parties shall be subject to the rules and regulations of the receiving university during the time they are enrolled.

Medical assistance as well as health and accident insurance will be dealt with in accordance to the legislations of the countries involved. Both parties commit to verify the existence of basic insurance and assistance related coverage.

If medical assistance or health and accident insurance are not regulated by international agreements among the countries involved, each student participating in programs under this

agreement shall be required by his or her university to purchase sufficient health and accident insurance for the duration of his or her participation.

Article 4

Fees not specifically covered by this agreement, and the cost of housing and meals, shall be borne by the students themselves.

Article 5

This executive protocol will be in effect during the academic year 200...../200.....

After the evaluation of the outcomes of this agreement it can be renewed for following academic years. Variations and changes can be made in writing by mutual agreement of the deans of the two faculties.

Either of the parties may terminate this protocol before the expiry date by giving written notice to the other party. The termination will not have effects on ongoing activities.

Article 6

This agreement is drawn up in four copies, two in Italian and two in English, each of these texts being equally authentic. Enclosures A, B and C are an integral part of this agreement. Both parties will receive a copy in each language. All misinterpretations will be settled by mutual assent.

The Dean of the Faculty of
.....
Roma Tre University
Prof.

The Dean of the Faculty of
.....
Roma Tre University
Prof.

Rome,

.....,

ENCLOSURE A: ADMITTANCE REQUIREMENTS

**STUDENT MOBILITY EXECUTIVE PROTOCOL
BETWEEN THE FACULTY OF**

**OF ROMA TRE UNIVERSITY
AND THE FACULTY OF**

OF THE UNIVERSITY OF _____

between	Roma Tre University	Faculty of..../Degree course of...../
and	Faculty of..../Degree course of...../

STUDENT MOBILITY

Cycle			Flows		Total	
1st cycle	2nd cycle	Postgraduate courses	from	to	Number of students	months
			Roma Tre		
			Roma Tre		
			Roma Tre		
			Roma Tre		
			Roma Tre		
			Roma Tre		

SPECIFIC REQUIREMENTS

Incoming students		Outgoing students	
Year of the student's career		Year of the student's career	
N° of exams passed		N° of exams passed	
N° of obtained credits		N° of obtained credits	
Courses the student must have already attended before the mobility (if any)		Courses the student must have already attended before the mobility (if any)	
Other		Other	

COORDINATORS/ACADEMIC TUTORS

Roma Tre University		University of	
Name		Name	
Address		Address	
Tel/fax		Tel/fax	
e-mail		e-mail	
Office hours		Office hours	

ADMINISTRATION REFERENCE PERSONS

Roma Tre University		University of	
Name		Name	
Address		Address	
Tel/fax		Tel/fax	
e-mail		e-mail	

The Dean of the Faculty of

.....

Roma Tre University

Prof.

Rome,

The Dean of the Faculty of

.....

Roma Tre University

Prof.

.....,



Partner's logo

ENCLOSURE B: LEARNING AGREEMENT

**STUDENT MOBILITY EXECUTIVE PROTOCOL
BETWEEN THE FACULTY OF**

**OF ROMA TRE UNIVERSITY
AND THE FACULTY OF**

OF THE _____

Academic Year...../..... – Field of Study:

Name and Surname of the student:

Sending Institution:

**DETAILS OF THE PROPOSED STUDY PROGRAMME ABROAD/LEARNING
AGREEMENT**

Receiving institution:..... Country:

Course unit code (if any)	Course unit title at receiving institution	ECTS

Student's signature: Date:

SENDING INSTITUTION

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

Date of approval by the Degree Programme Council:

Degree Course President	Academic coordinator's/tutor's signature
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DATE:

RECEIVING INSTITUTION

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

Degree Course President signature	Academic coordinator's/tutor's signature
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DATE:



Partner's logo

ENCLOSURE C: LEARNING AGREEMENT – DEFINITIVE VERSION

**STUDENT MOBILITY EXECUTIVE PROTOCOL
BETWEEN THE FACULTY OF**

**OF ROMA TRE UNIVERSITY
AND THE FACULTY OF**

OF THE _____

Academic Year...../..... – Field of Study:

Name and Surname of the student:

Sending Institution:

Length of the study period: from to

**CHANGES TO THE ORIGINAL PROPOSED STUDY PROGRAMME/LEARNING
AGREEMENT**

Receiving institution: Country:

Course unit code (if any)	Course unit title at receiving institution	ECTS

Student's signature: Date:

SENDING INSTITUTION

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

Date of approval by the Degree Programme Council:

Degree Course President signature	Academic coordinator's/tutor's signature
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DATE:

RECEIVING INSTITUTION

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

Degree Course President signature	Academic coordinator's/tutor's signature
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DATE: