Faculty of Law, University of Macau
Incoming Exchange Programme
Learning Agreement

PART I - STUDENT PERSONAL INFORMATION

Last Name:		
First Name:		
Date of Birth:	**Gender:**	(Photo)
Nationality:	**Country:**	
Passport No.:	**Tel:**	
Email:		

PART II – CURRENT EDUCATION OF STUDENT

Home Institution:

Faculty:

Level: ☐ Bachelor / ☐ Master / ☐ PhD / ☐ Other, please specify: _____

Current Year of Study:

PART III – CONTACT OF HOME INSTITUTION

Name of Contact Officer:	
Tel:	**Email:**
Address:	

PART IV – EXCHANGE INFORMATION

Exchange Period: ☐ 1st Semester / ☐ 2nd Semester / ☐ Full Academic Year

Year of Study during Exchange:

Study Programme at the Faculty of Law, University of Macau (FLL-UM):

☐ Bachelor of Law in Chinese Language (Daytime)

☐ Bachelor of Law in Chinese Language (Evening)

☐ Bachelor of Law (Conducted in Chinese and Portuguese)

☐ Bachelor of Law in Portuguese Language

☐ Bachelor of Law in Chinese Law and Global Legal Studies

☐ Master of Law (Chinese Language)

☐ Master of Law (Portuguese Language)

☐ Master of Law in European Union Law, International Law and Comparative Law (English Language)

☐ Master of Law in International Business Law (English Language)

☐ PhD Programme

Faculty of Law, University of Macau
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PART V – COURSE SELECTION *(FILL IN BEFORE EXCHANGE)*

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<table>
<tr><td rowspan="11">Fill in Before Exchange</td><td colspan="2">Student Name:</td></tr>
<tr><td colspan="2">Programme:</td></tr>
<tr><td>Course Code</td><td>Course Title</td></tr>
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Note1: The course list of each programme is attached herewith for reference.

Note2: Please note that there is no course offering for PhD Programme in 2nd Semester.

Note3: Students may make changes to their course enrolment during the Course Add/Drop period each semester. Students should get the approval from the Home Institution before submission.

Student: **Approved by Home Institute:**

_____   _____
Signature   Signature
Date: Date:

For FLL Office's Use

☐ Endorsed

Comments (if any)_____

☐ Not Endorsed

Comments (if any)_____

Programme Coordinator:

_____
Signature
Date: