**Section to be completed AFTER THE MOBILITY**

#### **RECOGNITION OUTCOMES**

#### **I. MINIMUM INFORMATION TO INCLUDE IN THE RECEIVING INSTITUTION'S TRANSCRIPT OF RECORDS**

|  |
| --- |
| Start and end dates of the study period: from *[day/month/year]* till *[day/month/year]*. |

Table C: academic outcomes at receiving institution

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Component code(if any)**  | **Component title (as indicated in the course catalogue) at the receiving institution** | **Was the component successfully completed by the student? [Yes/No]** | **Number of ECTS credits**  | **Receiving institution grade** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  | *Total:* |  |

|  |
| --- |
| *[Signature of responsible person in receiving institution and date]*  |