

SPRACHLIT COURSE CONFIRMATION

RECEIVING INSTITUTION

Humboldt-Universität zu Berlin

Sprach- und literaturwissenschaftliche Fakultät / Faculty of Language,
Literature and Humanities

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STUDENT

First name _____ of student:

Date and place of birth:

Immatriculation number (HU):

BA

MA

Subject(s) at Humboldt-Universität zu Berlin:

SENDING INSTITUTION

Please enter the exact address of the person in charge of ECTS/Transcript of Records at your home university. Your transcript will be sent to the e-mail address indicated here.

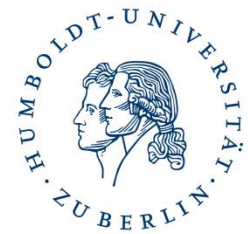
Name of home university:

City, country:

Faculty/Department:

Departmental coordinator:

E-mail address of coordinator:



SPRACHLIT COURSE CONFIRMATION

Winter Term 2023/24

Spring Term 2024

Course code (starts with 52)	Module / Course Title	ECTS LP
	Module name:	
Exam type		
	Module name:	
Exam type		
	Module name:	
Exam type		
	Module name:	
Exam type		
	Module name:	
Exam type		
		total

Name of student