**ANEXO II**

**Edital nº. 02/2020**

**PLANO DE ESTUDOS**

**Nome do aluno (N*ame*):**

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**Curso na UFPel (*Program at UFPel*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Universidade canadense (*Canadian University*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Curso na Universidade canadense (*Programa at the Canadian University*):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Date :\_\_\_/\_\_/

Assinatura do aluno (S*tudent’s signature*):

Através da assinatura deste documento, a Coordenação do Colegiado do Curso manifesta aprovação do plano de estudos descrito acima e, após o retorno do estudante, compromete-se a reconhecer os créditos cursados na instituição de destino no caso de aprovação do aluno nas mesmas, com apresentação do atestado denotas.

*By signing this document, the Head of the School Board expresses approval of the study plan described above and, upon student’s return, commits to recognize as earned credits the courses taken at the host institution should those students have passed them and present their home university an official schoolrecord.*

O plano de estudos pode ser alterado conforme tratado com o responsável na IES destino; nesse caso, o documento com as alterações deve ser enviado pelo aluno à CRInter que providenciará as assinaturas necessárias no novo plano (Coordenador de Relações Internacionais da UFPel e Responsável do respectivo Colegiado de Curso)."

*The study plan can be modified as discussed with the head of the host of the higher education institution; in that case, the document with the amendments must be submitted by the student to CRInter, which in turn will provide the necessary signatures to the new plan (UFPel’s Head of the International Relations Office and the respective Head of the SchoolBoard.)*

Informações de contato - Coordenador do Colegiado

(*Contact information* - *Head of the School Board*)

Nome (*Name*):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telefone (*Phone*):

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Email:

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Assinatura do Coordenador do Colegiado (*Head of the School Board’s signature*):