# Cooperation Agreement on hosting of an LU student

1

By signing this agreement, the hosting party agrees to accept and host this student in the time period:

      to

Throughout the activity/mobility the student will remain enrolled at Lund University. The student is covered by Kammarkollegiet’s student insurance in accordance with the current insurance regulations.

The parties are aware that Lund university’s decision to nominate the student may be revoked by Lund University should the Swedish Ministry for Foreign Affairs advise against any travel to the destination abroad and/or if The Legal, Financial and Administrative Services Agency (Kammarkollegiet) cancels its insurance “Student UT”. In such cases Lund University will inform the hosting party who will no longer have any obligation to host the student.

### Student

|  |  |  |
| --- | --- | --- |
| Name      | Date of birth      | Study programme |
| Postal address      |
| E-mail address      | Telephone      |

### Lund University

|  |  |
| --- | --- |
| Name of supervisor/coordinator      | Department      |
| Postal address      |
| E-mail address      | Telephone      |
| Signature | Date      |

### Host clinic/organisation/university

|  |  |
| --- | --- |
| Name of contact person      | Name of host clinic/organisation/university      |
| Postal address      | Country      |
| E-mail address      | Telephone      |
| Signature | Date      |