

Collaborative Learning Agreement

Date: _____

Between:

Institution A

Address: _____

Contact Person: _____

Email: _____

Phone: _____

And:

Institution B

Address: _____

Contact Person: _____

Email: _____

Phone: _____

Purpose:

This agreement outlines the terms of collaboration between Institution A and Institution B regarding the collaborative learning project "_____".

Scope of Collaboration:

- Describe specific objectives.
- Outline the roles and responsibilities of each institution.
- State the duration of the collaboration.

Confidentiality:

Both parties agree to maintain confidentiality of all shared information as per the terms below:

- Details of what is considered confidential.
- Duration of confidentiality commitment.

Amendments:

Any amendments to this agreement must be made in writing and signed by authorized representatives of both institutions.

Signatures:

For Institution A:

Name: _____

Title: _____

Signature: _____

For Institution B:

Name: _____

Title: _____

Signature: _____