

Academic Affiliation Agreement

Date: [Insert Date]

To: [Partner Institution Name]

Address: [Partner Institution Address]

Dear [Recipient's Name],

We are pleased to propose an Academic Affiliation Agreement between [Your Institution Name] and [Partner Institution Name]. The objective of this agreement is to establish a collaborative relationship that advances academic and research activities.

Agreement Terms:

1. **Collaboration Scope:** [Details about the programs, faculty exchanges, joint research projects, etc.]
2. **Duration:** This agreement will commence on [start date] and will be reviewed every [number] years.
3. **Responsibilities:** Both institutions will [detail responsibilities of each party].

We believe that this collaboration will be mutually beneficial and enhance the educational experience for our students.

Please sign below to indicate your agreement to the terms set forth in this letter.

Sincerely,

[Your Name]

[Your Title]

[Your Institution Name]

[Your Contact Information]

Agreed and accepted by:

[Partner Institutional Signature Line]

[Partner Name]

[Partner Title]

[Partner Institution Name]