**Learning** **Agreement** **Student** **Mobility** **for** **Traineeships**

**Between** **Programme** **and** **Partner** **Countries**

*From* *Partner* *to* *Programme* *Countries*

**Higher** **Education:** **Learning** **Agreement** **form** ***Student’s*** ***name*** ***Academic*** ***Year*** ***20…/20…***

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| **Student** | **Last** **name(s)** | **First** **name(s)** | **Date** **of** **birth** | **Nationality1** | **Gender:** **[Male/Female/** **Undefined]** | **Study** **cycle2** | **Field** **of** **education**3 |
|  |  |  |  |  |  |  |
| **The** **Programme** **Country** **Institution** | **Name** | **Faculty/** **Department** | **Erasmus** **code4** | **Address** | **Country** | **Contact** **person** **name5** **email;** **phone** |
|  |  |  |  |  |  |
| **The** **Partner** **Country** **Institution** | **Name** | **Faculty/** **Department** | **Address** | **Country** | **Contact** **person** **name;** **email;** **phone** |
|  |  |  |  |  |
| **Receiving** **Organisation** | **Name** | **Department** | **Address;** **website** | **Country** | **Size** | **Contact** **person6** **name;** **position;** **e-mail;** **phone** | **Mentor7** **name;** **position;****e-mail;** **phone** |
|  |  |  |  | ☐ < 250 employees ☐ > 250 employees |  |  |

1 **Nationality:** Country to which the person belongs administratively and that issues the ID card and/or passport.

2 **Study** **cycle:** Short cycle (EQF level 5) / Bachelor or equivalent first cycle (EQF level 6) / Master or equivalent second cycle (EQF level 7) / Doctorate or equivalent third cycle (EQF level 8).

3 **Field** **of** **education:** The ISCED-F 2013 search tool available at http://ec.europa.eu/education/tools/isced-f\_en.htm should be used to find the ISCED 2013 detailed field of education and training that is closest to the subject of the degree to be awarded to the trainee by the sending institution.

4 **Erasmus** **code:** a unique identifier that every higher education institution that has been awarded with the Erasmus Charter for Higher Education (ECHE) receives. It is only applicable to higher education institutions located in Programme Countries.

5 **Contact** **person** **at** **the** **Programme/** **Partner** **Country** **Institution**: a person who provides a link for administrative information and who, depending on the structure of the higher education institution, may be the departmental coordinator or will work at the international relations office or equivalent body within the institution.

6 **Contact** **person** **at** **the** **Receiving** **Organisation**: a person who can provide administrative information within the framework of Erasmus+ traineeships. The contact person may act as well as supervisor who is the person responsible for signing the Learning Agreement.

7 **Mentor**: the role of the mentor is to provide support, encouragement and information to the trainee on the life and experience relative to the organisation (culture of the organisation, informal codes and conducts, etc.). Normally, the mentor should be a different person than the supervisor and the supervisor.

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**Higher** **Education:** **Learning** **Agreement** **form** ***Student’s*** ***name*** ***Academic*** ***Year*** ***20…/20…***

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| Award ECTS credits (or equivalent): Yes ☐ No ☐ | If yes, please indicate the number of credits: …. |
| Give a grade: Yes ☐ No ☐ | If yes, please indicate if this will be based on: Traineeship certificate ☐ Final report ☐ Interview ☐ |
| Record the traineeship in the trainee's | Transcript of Records: Yes ☐ No ☐ Diploma Supplement (mandatory if sending institution in EHEA) Yes ☐ No ☐ Europass Mobility Document: Yes ☐ No ☐ |

**Before** **the** **mobility**

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|  | ***Table*** ***A*** ***-*** ***Traineeship*** ***Programme*** ***at*** ***the*** ***Receiving*** ***Organisation*****Planned** **period** **of** **the** **mobility:** **from** **[month/year]** **…………….** **to** **[month/year]** **…………….** |
| **Traineeship** **title:** **…** |
| **Number** **of** **working** **hours** **per** **week:** **…** | **Traineeship** **in** **digital** **skills8:** **Yes** ☐ **No** ☐ |
| **Detailed** **programme** **of** **the** **traineeship:** |
| **Knowledge**, **skills** **and** **competences** **to** **be** **acquired** **by** **the** **end** **of** **the** **traineeship** **(expected** **Learning** **Outcomes):** |
| **Monitoring** **plan:** |
| **Evaluation** **plan:** |

The level of **language** **competence9** in \_\_\_\_\_\_\_\_ [*indicate* *here* *the* *main* *language* *of* *work*] that the trainee already has or agrees to acquire by the start of the mobility period is: *A1* ☐ *A2* ☐ *B1* ☐ *B2* ☐ *C1* ☐ *C2* ☐ *Native* *speaker* ☐

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| ***Table*** ***B*** ***–*** ***Commitment*** ***of*** ***the*** ***Sending*** ***Institution*** ***before*** ***the*** ***mobility*** *Please* *use* *only* *one* *of* *the* *following* *boxes:***Recognition** **linked** **to** **the** **Traineeship** **Programme**1. The traineeship is **embedded** **in** **the** **curriculum** and upon satisfactory completion of the traineeship, the institution undertakes to: |
|  | Award …….. .…ECTS credits (or equivalent)10 |
| Give a grade based on: Traineeship certificate ☐ Final report ☐ Interview ☐ |
| Record the traineeship in the trainee's | Transcript of Records Yes ☐ (mandatory) |
| Diploma Supplement (mandatory if sending institution in EHEA) Yes ☐ No ☐ |
| Europass Mobility Document: Yes ☐ No ☐ |
| 2. The traineeship is **voluntary** and, upon satisfactory completion of the traineeship, the institution undertakes to: |

8 **Traineeship** **in** **digital** **skills:** any traineeship will be considered as such when one or more of the following activities are practised by the trainee: digital marketing (e.g. social media management, web analytics); digital graphical, mechanical or architectural design; development of apps, software, scripts, or websites; installation, maintenance and management of IT systems and networks; cybersecurity; data analytics, mining and visualisation; programming and training of robots and artificial intelligence applications. Generic customer support, order fulfilment, data entry or office tasks are not considered in this category.

9 **Level** **of** **language** **competence**: a description of the European Language Levels (CEFR) is available at: <https://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>

10 **ECTS** **credits** **or** **equivalent**: in countries where the "ECTS" system it is not in place, in particular for institutions located in Partner Countries not participating in the Bologna process, "ECTS" needs to be replaced in all tables by the name of the equivalent system that is used. A web link to an explanation to the system should be added.

2

**Higher** **Education:** **Learning** **Agreement** **form** ***Student’s*** ***name*** ***Academic*** ***Year*** ***20…/20…***

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| ***Table*** ***B*** ***–*** ***Commitment*** ***of*** ***the*** ***Programme*** ***Country*** ***Institution*** ***regarding*** **Accident** **insurance** **for** **the** **trainee** |
|  | The Programme Country Institution will provide accident insurance to the trainee (if not provided by the Receiving Organisation ):Yes ☐ No ☐ | The accident insurance covers:- accidents during work-related travel: Yes ☐ No ☐ - accidents on the way to or from work: Yes ☐ No ☐ |  |
| The Programme Country Institution will provide liability insurance to the trainee (if not provided by the Receiving Organisation): Yes ☐ No ☐ |
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| ***Table*** ***C*** ***-*** ***Receiving*** ***Organisation*** |
|  | The Receiving Organisation will provide financial support to the trainee for the traineeship: Yes ☐ No ☐ | If yes, amount (EUR/month): ……….. |  |
| The Receiving Organisation will provide a contribution in kind to the trainee for the traineeship: Yes ☐ No ☐ If yes, please specify: …. |
| The Receiving Organisation will provide accident insurance to the trainee (if not provided by the Programme Country Institution): Yes ☐ No ☐ | The accident insurance covers:- accidents during work-related travel: Yes ☐ No ☐ - accidents on the way to or from work: Yes ☐ No ☐ |
| The Receiving Organisation will provide liability insurance to the trainee (if not provided by the Programme Country Institution): Yes ☐ No ☐ |
| The Receiving Organisation will provide appropriate support and equipment to the trainee. |
| Upon completion of the traineeship, the Organisation undertakes to issue a Traineeship Certificate within 5 weeks after the end of the traineeship. |
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| By signing this document, the trainee, the Programme Country Institution, the Receiving Organisation and the Partner Country Institution confirm that they approve the Learning Agreement and that they will comply with all the arrangements agreed by all parties. The trainee and Receiving Organisation will communicate any problem or changes regarding the traineeship period to the Partner Country Institution and the Programme Country Institution. The Programme Country Institution and the trainee should also commit to what is set out in the Erasmus+ grant agreement. The Programme Country Institution undertakes to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships and the Partner Country Institution commits to respect the principles agreed in the inter-institutional agreement for institutions located in Partner Countries. |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Trainee |  |  | *Trainee* |  |  |
| Responsible person11 at the Programme Country Institution |  |  |  |  |  |
| Responsible person at the Partner Country Institution |  |  |  |  |  |
| Supervisor12 at the Receiving Organisation |  |  |  |  |  |

11 **Responsible** **person** **at** **the** **Programme/Partner** **Country** **institution**: this person is responsible for signing the Learning Agreement, amending it if needed and recognising the credits and associated learning outcomes on behalf of the responsible academic body as set out in the Learning Agreement. The name and email of the Responsible person must be filled in only in case it differs from that of the Contact person mentioned at the top of the document.

12 **Supervisor** **at** **the** **Receiving** **Organisation**: this person is responsible for signing the Learning Agreement, amending it if needed, supervising the trainee during the traineeship and signing the Traineeship Certificate. The name and email of the Supervisor must be filled in only in case it differs from that of the Contact person mentioned at the top of the document.

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**Higher** **Education:** **Learning** **Agreement** **form** ***Student’s*** ***name*** ***Academic*** ***Year*** ***20…/20…***

**During** **the** **Mobility**

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| ***Table*** ***A2*** ***-*** ***Exceptional*** ***Changes*** ***to*** ***the*** ***Traineeship*** ***Programme*** ***at*** ***the*** ***Receiving*** ***Organisation***(to be approved by e-mail or signature by the student, the responsible person in the Programme Country Institution, the responsible person in the Receiving Organisation and the Partner Country Institution)**Planned** **period** **of** **the** **mobility:** **from** **[month/year]** **…………….** **till** **[month/year]** **…………….** |
| **Traineeship** **title:** **…** | **Number** **of** **working** **hours** **per** **week:** **…** |
| **Detailed** **programme** **of** **the** **traineeship** **period:** |
| **Knowledge**, **skills** **and** **competences** **to** **be** **acquired** **by** **the** **end** **of** **the** **traineeship** **(expected** **Learning** **Outcomes)**: |
| **Monitoring** **plan:** |
| **Evaluation** **plan:** |

**After** **the** **Mobility**

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| ***Table*** ***D*** ***-*** ***Traineeship*** ***Certificate*** ***by*** ***the*** ***Receiving*** ***Organisation*** |
| **Name** **of** **the** **trainee:** |
| **Name** **of** **the** **Receiving** **Organisation:** |
| **Sector** **of** **the** **Receiving** **Organisation:** |
| **Address** **of** **the** **Receiving** **Organisation** [street, city, country, phone, e-mail address]**,** **website:** |
| **Start** **date** **and** **end** **date** **of** **traineeship:** **from** **[day/month/year]** **………………….** **to** **[day/month/year]** **………………..** |
| **Traineeship** **title:** |
| **Detailed** **programme** **of** **the** **traineeship** **period** **including** **tasks** **carried** **out** **by** **the** **trainee:** |
| **Knowledge,** **skills** **(intellectual** **and** **practical)** **and** **competences** **acquired** **(achieved** **Learning** **Outcomes):** |
| **Evaluation** **of** **the** **trainee:** |
| **Date:** |
| **Name** **and** **signature** **of** **the** **Supervisor** **at** **the** **Receiving** **Organisation:** |

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