**PROPOSING INSTITUTION**

**ERASMUS CODE**

UNIVERSITA’ DEGLI STUDI DI FIRENZE
1 FIRENZE01

Legal Representative

Prof. Luigi Dei – Rettore

Contact details for Bilateral Agreements

Dott.ssa Maria Orfeo
Area Servizi alla Didattica – Mobilità internazionale
Piazza San Marco, 4 – 50121 Firenze – Italia - Tel. +39 055 2757682
http://www.unifi.it - E-mail: erasmusplus@adm.unifi.it

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**Proposing School/Department at UNIFI**

Contact person (Name, Address, Telephone, Fax, e-mail address)

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**Partner INSTITUTION**

**ERASMUS CODE**

Departmental/School Coordinator

And/or contact person (Name, Address, Telephone, Fax, e-mail address)

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**SMS (Student mobility for study) PROPOSAL**

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<tr>
<th>FROM (ERASMUS CODE)</th>
<th>TO (ERASMUS CODE)</th>
<th>ISCED code</th>
<th>Subject Description</th>
<th>Study CYCLE (1-bach, 2-master, 3-doct)</th>
<th>Language of instruction and required level</th>
<th>NUMBER OF STUDENTS</th>
<th>NUMBER OF MONTHS EACH</th>
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**STA (Teaching staff mobility) PROPOSAL** (min 2 days max 2 months – min 8 teaching hours x week)

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<th>FROM (ERASMUS CODE)</th>
<th>TO (ERASMUS CODE)</th>
<th>ISCED 2013 code</th>
<th>Subject Description</th>
<th>NUMBER OF TS MEMBERS</th>
<th>WEEKS each</th>
<th>NAME OF STAFF MEMBERS</th>
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Signature of proposing person at UNIFI ________________________________ Date ____________________

Signature of contact person at partner Institution ______________________ Date ____________________

- **This is a draft agreement**, UNIFI contact person has to submit to the Erasmus Coordinator of the relevant School (http://www.unifi.it/vp-743-school-coordinators.html) before the end of September.
- The mobility **is confirmed only** if the content of this draft agreement is included in the official Erasmus+ Agreement proposal sent by our Rector (see procedure: https://www.unifi.it/vp-10148-bilateral-agreements.html?newlang=ita. For further information please contact: erasmusplus@adm.unifi.it