

# International mobility extra UE 24/25 Learning Agreement Mobility for Traineeships<sup>1</sup>

Trainee	Last name(s)	First name(s)	Date of birth	Nationality <sup>2</sup>	Gender [Male/Female/ Undefined]	Level of education (EQF level) <sup>3</sup>	Field of education <sup>4</sup>
Sending Institution	Name	Faculty/ Department	Erasmus code (if applicable)	Address	Country	Contact person name; email	
[only if different from Beneficiary Organisation]							
	Name	Department	Address; website	Country	Size	Contact person <sup>5</sup> name; position; email	Mentor <sup>6</sup> name; position; email
Receiving Institution					□ ≤250 employees □ > 250 employees		

## Before the mobility

Table A - Traineeship Programme at the Receiving Organisation				
Planned period of the physical component: from [day (optional)/month/year] to [day (optional)/month/year]				
If applicable, planned period of the virtual component: from [day (optional)/month/year] to day (optional)/month/year]				
Traineeship title: Number of working hours per week:				
Detailed programme of the traineeship (including the virtual component, if applicable):				
Traineeship in digital skills <sup>7</sup> : Yes 🗌 No 🗌				
Knowledge, skills and competences to be acquired by the end of the traineeship (expected learning outcomes):				
Monitoring plan:				
Evaluation plan:				
The level of language competence <sup>8</sup> 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: <i>A1 A2 B1 B2 C1 C2 Native speaker</i>				

Table B - Sending Institution							
	Please use only one of the following three boxes: <sup>9</sup>						
1. The traineeship is embedded in the curriculum and upon satisfactory completion of the traineeship, the institution undertakes to:							
	AwardECTS credits (or equivalent) <sup>10</sup> Give a grade based on: Traineeship certificate 🗌 Final report 🗌 Interview 🗌						
Record the traineeship in the trainee's Transcript of Records and Diploma Supplement (or equivalent).							
Record the traineeship in the trainee's Europass Mobility Document: Yes 🗌 No 🗌							
2. The traineeship is <b>voluntary</b> and, upon satisfactory completion of the traineeship, the institution undertakes to:							
Award ECTS credits (or equivalent): Yes No I 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 Diploma Supplement (or equivalent).         Record the traineeship in the trainee's Europass Mobility Document: Yes   No           Accident insurance for the trainee         The Sending institution will provide an accident insurance to the trainee (if not provided by the Receiving Organisation):       The accident insurance for work purposes: Yes   No           - accidents during travels made for work purposes:       Yes   No         - accidents during travels made for work purposes: Yes   No           The Sending institution will provide a liability insurance to the trainee (if not provided by the Receiving Organisation):       Yes   No           The Sending institution will provide financial support to the trainee for the traineeship: Yes   No         If yes, amount (EUR/month):         The Receiving Institution will provide a contribution in kind to the trainee for the traineeship: Yes   No         If yes, amount (EUR/month):         The Receiving Institution will provide an accident insurance to the trainee for the traineeship: Yes   No         If yes, please specify:         The Receiving Institution will provide an accident insurance to the trainee (if not provided by the beneficiary organisation): Yes   No         - accidents during travels made for work purposes: Yes   No           The Receiving Institution will provide a liability insurance to the trainee (if not provided by the beneficiary organisation): Yes   No         - accidents on the way to work and back from work: Yes   No           The Receiving Institution will provide a purporiate support							
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- accidents on the way to work and back from work: Yes   No        The Sending institution will provide a liability insurance to the trainee (if not provided by the Receiving Organisation): Yes   No        Table C - Receiving Organisation      The Receiving Institution will provide financial support to the trainee for the traineeship: Yes   No   If yes, amount (EUR/month):      The Receiving Institution will provide a contribution in kind to the trainee for the traineeship: Yes   No        If yes, please specify:      The Receiving Institution will provide an accident insurance to the trainee (if not provided by the beneficiary organisation): Yes   No        The Receiving Institution will provide a liability insurance to the trainee (if not provided by the beneficiary organisation): Yes   No        The Receiving Institution will provide a liability insurance to the trainee (if not provided by the beneficiary organisation): Yes   No        The Receiving Institution will provide a liability insurance to the trainee (if not provided by the beneficiary organisation): Yes   No        The Receiving Institution will provide a liability insurance to the trainee (if not provided by the beneficiary organisation): Yes   No        The Receiving Institution will provide a ppropriate support and equipment to the trainee.							
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Upon completion of the traineeship, the Receiving Institution 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 Sending Institution, the Receiving Institution confirm that they approve the learning agreement and that they will comply vith all the arrangements agreed by all parties. The trainee and receiving institution will communicate to the sending institution any problem or changes regarding the traineeship period.							
Commitment Name Email Position Date Signature							
rainee Trainee							
Responsible person <sup>11</sup> at the sending institution							
Supervisor <sup>12</sup> at the receiving organisation							

# **During the Mobility**

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 sending institution and the responsible person in the receiving				
organisation)				
Planned period of the mobility: from [day (optional)/mont	h/year] till [day (optional)/month/year]			
If applicable, planned period(s) of the virtual mobility: from [day (optional)/month/year] to [day (optional)/month/year]				
Traineeship title:	Number of working hours per week:			
Detailed programme of the traineeship period (including the virtual component, if applicable):				
Knowledge, skills and competences to be acquired by the end of the traineeship (expected learning outcomes):				
Monitoring plan:				



#### Evaluation plan:

 By signing this document, the trainee, the Sending Institution, the Receiving 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 institution will communicate to the sending institution any problem or changes regarding the traineeship period.

 Commitment
 Name
 Email
 Position
 Date
 Signature

 Trainee
 Image: Trainee
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### After the Mobility

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 Institution [street, city, country, e-mail address], website:
Start date and end date of the complete traineeship (incl. virtual component, if applicable): from [day/month/year]
Start date and end date of physical component: from [day/month/year] to [day/month/year]
Traineeship title:
Detailed programme of the traineeship period including tasks carried out by the trainee (including the virtual component, if applicable):
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 Institution:



<sup>1</sup> In case the mobility combines studies and traineeship, the mobility agreement for studies template should be used and adjusted to fit both activity types.

<sup>2</sup> Country to which the person belongs administratively and that issues the ID card and/or passport.

<sup>3</sup> Level of education: 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). EQF level codes 5 to 8 are equivalent to the ISCED levels 5 to 8.

<sup>4</sup> Field of education: The <u>ISCED-F 2013 search tool</u> available at <u>http://ec.europa.eu/education/tools/isced-f\_en.htm</u> 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.

<sup>5</sup> **Contact person at the receiving institution**: a person who can provide administrative information within the framework of the traineeship.

<sup>6</sup> **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.

<sup>7</sup> **Traineeship in digital skills:** any traineeship where trainees receive training and practice in at least one or more of the following activities: 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.

<sup>8</sup> **Level of language competence**: a description of the European Language Levels (CEFR) is available at: <u>https://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr</u>

# <sup>9</sup> There are three different provisions for traineeships:

- 1. Traineeships embedded in the curriculum (counting towards the degree);
- 2. Voluntary traineeships (not obligatory for the degree);
- 3. Traineeships for recent graduates.

<sup>10</sup> **ECTS credits or equivalent**: in countries where the "ECTS" system it is not in place, "ECTS" needs to be replaced in all tables by the name of the equivalent system that is used and a web link to an explanation to the system should be added.

<sup>11</sup> **Responsible person at the sending institution**: this person is responsible for signing the learning agreement, amending it if needed and is responsible for recognising the credits and associated learning outcomes on behalf of the responsible academic body as set out in the learning agreement.

<sup>12</sup> **Supervisor at the receiving institution**: 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.

<sup>13</sup> **Responsible person at the sending institution**: this person is responsible for signing the learning agreement, amending it if needed and is responsible for recognising the credits and associated learning outcomes on behalf of the responsible academic body as set out in the learning agreement.

<sup>14</sup> **Supervisor at the receiving institution**: 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.