**Erasmus+ Learning Agreement**

**Student Mobility for Traineeships[[1]](#endnote-1)**

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| **Trainee** | | **Last name(s)** | | **First name(s)** | **Date of birth** | | **Nationality** | | **Gender [Male/Female/Undefined]** | | **Level of education (EQF level)** | | **Field of education** | |
|  | |  |  | |  | |  | |  | |  | |
| **Beneficiary organisation** | | **Name** | | **Faculty/ Department**  (if applicable) | **Erasmus code** (if applicable) | | **Address** | | **Country** | | **Contact person name; email** | | | |
| Alexandru Ioan Cuza University of Iasi | | ……. | RO IASI02 | | Carol I Blvd, Nr.11, 700506 Iasi | | Romania | | Grigorita-Elena COCEANU  [grigorita.coceanu@uaic.ro](mailto:grigorita.coceanu@uaic.ro)  0040232201812 | | | |
| **Receiving** **Organisation** | | **Name** | | **Department** | **Address; website** | | **Country** | | **Size** | | **Contact person name; position; email** | | **Mentor name; position;**  **email** | |
|  | |  |  | |  | | ☐ ≤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:** Yes ☐ No ☐ | | | | | | | | | | | | | | |
| **Knowledge**, **skills and competences to be acquired by the end of the traineeship (expected learning outcomes):…………….** | | | | | | | | | | | | | | |
| **Monitoring plan:…………** | | | | | | | | | | | | | | |
| **Evaluation plan:…………..** | | | | | | | | | | | | | | |
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| The level of **language competence** 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 - Sending Institution***  *Please use only one of the following three boxes:*   1. The traineeship is **embedded in the curriculum** and upon satisfactory completion of the traineeship, the institution undertakes to:   Award ……...…ECTS credits (or equivalent) 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 ☐   1. The traineeship is **voluntary** and, upon satisfactory completion of the traineeship, the institution undertakes to:   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 ☐  Record the traineeship in the trainee’s Diploma Supplement (or equivalent).  Record the traineeship in the trainee’s Europass Mobility Document: Yes ☐ No ☐   1. The traineeship is carried out by a **recent graduate** and, upon satisfactory completion of the traineeship, the institution undertakes to:   Award ECTS credits (or equivalent): Yes ☐ No ☐ If yes, please indicate the number of credits: ….  Record the traineeship in the trainee’s Europass Mobility Document *(highly recommended)*: Yes ☐ No ☐  **Accident insurance for the trainee**  The beneficiary organisation will provide an accident insurance to the trainee (if not provided by the Receiving Organisation):  Yes ☐ No ☐  The accident insurance covers:  - accidents during travels made for work purposes: Yes ☐ No ☐  - accidents on the way to work and back from work: Yes ☐ No ☐  The beneficiary organisation will provide a liability insurance to the trainee (if not provided by the Receiving Organisation): Yes ☐ No ☐ | | | | | |
| ***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 an accident insurance to the trainee (if not provided by the beneficiary organisation): Yes ☐ No ☐  The accident insurance covers:  - accidents during travels made for work purposes: Yes ☐ No ☐ - accidents on the way to work and back from work: Yes ☐ No ☐  The Receiving Organisation will provide a liability insurance to the trainee (if not provided by the beneficiary organisation):  Yes ☐ No ☐  The Receiving Organisation will provide appropriate support and equipment to the trainee.  Upon completion of the traineeship, the Receiving Organisation undertakes to issue a traineeship certificate within 5 weeks after the end of the traineeship. | | | | | |
| By signing this document, the trainee, the beneficiary organisation, the receiving organisation [and the sending institution, if different from the beneficiary organisation] 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 to the sending institution [and beneficiary organisation, if different from the sending institution] any problem or changes regarding the traineeship period. The sending institution [and the beneficiary organisation, if different from the sending institution] and the trainee should also commit to what is set out in the Erasmus+ grant agreement. The sending institution [and the receiving institution [if the receiving organisation is a higher education institution] undertake[s] to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships. | | | | | |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Trainee |  |  | *Trainee* |  |  |
| Responsible person at the beneficiary organisation |  |  |  |  |  |
| Supervisor at the receiving organisation |  |  |  |  |  |

**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 sending institution and the responsible person in the receiving organisation) | |
| **Planned period of the mobility: from [day (optional)/month/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: ……………..** | | |

**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, e-mail address]**, website: ………………** |
| **Start date and end date of the complete traineeship (incl. virtual component, if applicable): from [day/month/year] …………………. to [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 Organisation: ………………………..** |

1. In case the mobility combines studies and traineeship, the mobility agreement for studies template should be used and adjusted to fit both activity types. [↑](#endnote-ref-1)