

Erasmus+ Learning Agreement

Student Mobility for Traineeships¹

Trainee	Last name(s)	First name(s)	Date of birth	Nationality ²	Gender [Male/Female/ Undefined]	Level of education (EQF level) ³	Field of education ⁴
Beneficiary organisation ⁵	Name	Faculty/ Department (if applicable)	Erasmus code ⁶ (if applicable)	Address	Country	Contact person name ⁷ ; email	
	UNIVERSITÀ DEGLI STUDI DI PERUGIA		I PERUGIA01	PIAZZA UNIVERSITÀ, 1 06123 PERUGIA	ITALY	SONIA TRINARI, HEAD OF THE INTERNATIONAL RELATIONS AREA ALESSANDRA TUNNO, HEAD OF THE MOBILITY OFFICE servizio.outgoing@unipg.it +39 075 585 5173 - 2106	
Sending Institution [only if different from Beneficiary Organisation]	Name	Faculty/ Department	Erasmus code (if applicable)	Address	Country	Contact person name; email	
Receiving Organisation	Name	Department	Address; website	Country	Size	Contact person ⁸ name; position; email	Mentor ⁹ name; position; email
					<input type="checkbox"/> ≤250 employees <input type="checkbox"/> > 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 ¹⁰ : Yes <input type="checkbox"/> No <input type="checkbox"/>	
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 ¹¹ 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 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> Native speaker <input type="checkbox"/>	

Table B - Sending Institution

Please use only one of the following three boxes:¹²

1. The traineeship is **embedded in the curriculum** and upon satisfactory completion of the traineeship, the institution undertakes to:

AwardECTS credits (or equivalent) ¹³	Give a grade based on: Traineeship certificate <input type="checkbox"/> Final report <input type="checkbox"/> Interview <input type="checkbox"/>
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 <input type="checkbox"/> No <input type="checkbox"/>	

2. The traineeship is **voluntary** and, upon satisfactory completion of the traineeship, the institution undertakes to:

Award ECTS credits (or equivalent): Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please indicate the number of credits:
Give a grade: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please indicate if this will be based on: Traineeship certificate <input type="checkbox"/> Final report <input type="checkbox"/> Interview <input type="checkbox"/>	
Record the traineeship in the trainee's Transcript of Records: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Record the traineeship in the trainee's Diploma Supplement (or equivalent).	
Record the traineeship in the trainee's Europass Mobility Document: Yes <input type="checkbox"/> No <input type="checkbox"/>	

3. 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 <input type="checkbox"/> No <input type="checkbox"/>	If yes, please indicate the number of credits:
Record the traineeship in the trainee's Europass Mobility Document (<i>highly recommended</i>): Yes <input type="checkbox"/> No <input type="checkbox"/>	

Accident insurance for the trainee

The beneficiary organisation will provide an accident insurance to the trainee (if not provided by the Receiving Organisation): Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	The accident insurance covers: - accidents during travels made for work purposes: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> - accidents on the way to work and back from work: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
The beneficiary organisation will provide a liability insurance to the trainee (if not provided by the Receiving Organisation): Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Table C - Receiving Organisation

The Receiving Organisation will provide financial support to the trainee for the traineeship: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, amount (EUR/month):
The Receiving Organisation will provide a contribution in kind to the trainee for the traineeship: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify:	
The Receiving Organisation will provide an accident insurance to the trainee (if not provided by the beneficiary organisation): Yes <input type="checkbox"/> No <input type="checkbox"/>	The accident insurance covers: - accidents during travels made for work purposes: Yes <input type="checkbox"/> No <input type="checkbox"/> - accidents on the way to work and back from work: Yes <input type="checkbox"/> No <input type="checkbox"/>
The Receiving Organisation will provide a liability insurance to the trainee (if not provided by the beneficiary organisation): Yes <input type="checkbox"/> No <input type="checkbox"/>	
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 ¹⁴ at the beneficiary organisation			Erasmus Departmental		

<p>[Responsible person¹⁵ at the sending institution, if different from the beneficiary organisation]</p> <p>Supervisor¹⁶ at the receiving organisation</p>		Coordinator	
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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)/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

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.

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

³ **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.

⁴ **Field of education:** The [ISCED-F 2013 search tool](http://ec.europa.eu/education/tools/isced-f_en.htm) 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.

⁵ In the case of outgoing mobility, the beneficiary organisation is the sending institution.

⁶ **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 EU Member States and third countries associated to the programme.

⁷ **Contact person at the sending 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.

⁸ **Contact person at the receiving organisation:** a person who can provide administrative information within the framework of Erasmus+ traineeships.

⁹ **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.

¹⁰ **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.

¹¹ **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>

¹² **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.

¹³ **ECTS credits or equivalent:** in countries where the "ECTS" system 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.

¹⁴ **Responsible person at the beneficiary organisation:** this person is responsible for signing the learning agreement, amending it if needed and if the beneficiary organisation is the sending institution, is responsible for 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.

¹⁵ **Responsible person at the sending institution:** this person is responsible for signing the learning agreement, amending it if needed and if the beneficiary organisation is not the sending institution, is responsible for 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 responsible person at the beneficiary organisation.

¹⁶ **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.