

## Allegato C

# Erasmus+ Mobility Agreement Staff Mobility For Training<sup>1</sup>

Planned period of the physical mobility: from [day/month/year] to [day/month/year]

Duration (days) – excluding travel days: .....

If applicable, planned period of the virtual component: from [day/month/year] to [day/month/year]

## The Staff Member

|                        |  |                |           |
|------------------------|--|----------------|-----------|
| Last name (s)          |  | First name (s) |           |
| Seniority              |  | Nationality    |           |
| Sex<br>[M/F/Undefined] |  | Academic year  | 20../20.. |
| E-mail                 |  |                |           |

## The Sending Institution

|                                     |  |                                  |  |
|-------------------------------------|--|----------------------------------|--|
| Name                                |  | Faculty/Department               |  |
| Erasmus code<br>(if applicable)     |  |                                  |  |
| Address                             |  | Country/<br>Country code         |  |
| Contact person<br>name and position |  | Contact person<br>e-mail / phone |  |

## The Receiving Institution / Enterprise<sup>2</sup>

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

<sup>2</sup> All references to "**enterprise**" are only applicable to mobility for staff between EU Member States and third countries associated to the programme or within Capacity Building projects.

|                                      |  |                                       |                                                                                    |
|--------------------------------------|--|---------------------------------------|------------------------------------------------------------------------------------|
| Name                                 |  |                                       |                                                                                    |
| Erasmus code<br>(if applicable)      |  | Faculty/Department                    |                                                                                    |
| Address                              |  | Country/<br>Country code              |                                                                                    |
| Contact person,<br>name and position |  | Contact person<br>e-mail / phone      |                                                                                    |
| Type of enterprise:                  |  | Size of enterprise<br>(if applicable) | <input type="checkbox"/> <250 employees<br><input type="checkbox"/> >250 employees |

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For guidelines, please look at the end notes on page 3.

## Section to be completed BEFORE THE MOBILITY

### I. PROPOSED MOBILITY PROGRAMME

Language of training: .....

|                                                                                                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Overall objectives of the mobility:</b></p><br><br><br><br><br><br><br><br><br><br>                                                                                                 |
| <p><b>Added value of the mobility (in the context of the modernisation and internationalisation strategies of the institutions involved):</b></p><br><br><br><br><br><br><br><br><br><br> |

**Activities to be carried out (including the virtual component, if applicable):**

**Expected outcomes and impact (e.g. on the professional development of the staff member and on both institutions):**

## II. COMMITMENT OF THE THREE PARTIES

By signing<sup>3</sup> this document, the staff member, the sending institution and the receiving institution/enterprise confirm that they approve the proposed mobility agreement.

The sending higher education institution supports the staff mobility as part of its modernisation and internationalisation strategy and will recognise it as a component in any evaluation or assessment of the staff member.

The staff member will share his/her experience, in particular its impact on his/her professional development and on the sending higher education institution, as a source of inspiration to others.

The staff member and the beneficiary institution commit to the requirements set out in the grant agreement signed between them.

The staff member and the receiving institution/enterprise will communicate to the sending institution any problems or changes regarding the proposed mobility programme or mobility period.

### **The staff member**

Name:

Signature:

Date:

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<sup>3</sup> Circulating papers with original signatures is not compulsory. Scanned copies of signatures or electronic signatures may be accepted, depending on the national legislation of the country of the sending institution (in the case of mobility with third countries not associated to the programme: the national legislation of the EU Member State or third country associated to the programme). Certificates of attendance can be provided electronically or through any other means accessible to the staff member and the sending institution.

**The sending institution/enterprise**

Name of the responsible person:

Signature:

Date:

**The receiving institution**

Name of the responsible person:

Signature:

Date: