

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

The Chaff Manchau
If applicable, planned period of the virtual component: from [day/month/year] to [day/month/year]
Duration (days) – excluding travel days:
Planned period of the physical mobility: from [day/month/year] to [day/month/year]

#### **The Staff Member**

Last name (s)	First name (s)	
Seniority <sup>2</sup>	Nationality <sup>3</sup>	
Sex [M/F/Undefined]	Academic year	2023/2024
E-mail		

## **The Sending Institution**

Name	"Ion Creanga" State Pedagogical University of Chisinau	Faculty/Department	International Relations and Project Management Office
Erasmus code <sup>4</sup> (if applicable)	N/A		
Address	1 Ion Creanga., St., Chisinau, Republic of Moldova, MD-2069	Country/ Country code⁵	MD-Republic of Moldova
Contact person name and position	Lilia Petriciuc, Head International Relations and Project Management Office	Contact person e-mail / phone	petriciuc.lilia@upsc.md erasmus.plus@upsc.md

<sup>&</sup>lt;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>&</sup>lt;sup>2</sup> **Seniority:** Junior (approx. < 10 years of experience), Intermediate (approx. > 10 and < 20 years of experience) or Senior (approx. > 20 years of experience).

<sup>&</sup>lt;sup>3</sup> **Nationality:** Country to which the person belongs administratively and that issues the ID card and/or passport.

<sup>&</sup>lt;sup>4</sup> **Erasmus code:** A unique identifier that every higher education institution that has been awarded with the Erasmus Charter for Higher Education receives.. It is only applicable to higher education institutions located in EU Member States and third countries associated to the programme.

<sup>&</sup>lt;sup>5</sup> **Country code**: ISO 3166-2 country codes available at: <a href="https://www.iso.org/obp/ui/#search">https://www.iso.org/obp/ui/#search</a>.



### The Receiving Institution / Enterprise<sup>6</sup>

Name	University of Genoa		
Erasmus code (if applicable)	I GENOVA01	Faculty/Department	
Address		Country/ Country code	IT/Italy
Contact person, name and position		Contact person e-mail / phone	
Type of enterprise:		Size of enterprise (if applicable)	□<250 employees  ⊠>250 employees

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:	
Overall objectives of the mobility:	
Added value of the mobility (in the context of the modernisation and internationalisation strategies of the institutions involved):	
Activities to be carried out (including the virtual component, if applicable):	

<sup>&</sup>lt;sup>6</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.



Higher Education: Erasmus+ Mobility Agreement form Participant's name

LI dSI II dS	Participant's name
Expected outcomes and impact (e.g. the staff member and on both institution	
II. COMMITMENT OF THE THREE PARTIE	≅S
By signing <sup>7</sup> this document, the staff member, the send confirm that they approve the proposed mobility agreer	
The sending higher education institution supports tinternationalisation strategy and will recognise it as a staff member.	
The staff member will share his/her experience, in part and on the sending higher education institution, as a so	
The staff member and the beneficiary institution comm signed between them.	it to the requirements set out in the grant agreement
The staff member and the receiving institution/enterproblems or changes regarding the proposed mobility p	
The staff member	
Name:	
Signature:	Date:
The sending institution/enterprise	
Name of the responsible person: Assoc. Rector for International Relations and Coop	
Signature:	Date:

<sup>&</sup>lt;sup>7</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.



Higher Education: Erasmus+ Mobility Agreement form Participant's name

The receiving institution			
Name of the responsible person:			
Signature:	Date:		