

LEARNING AGREEMENT FOR TRAINEESHIPS

Academic year 2019-2020

The Trainee

Last name (s)		First name (s)	
Date of birth		Nationality	
Sex [M/F]		Academic year	2019/2020
Study cycle (bachelor, Master or PhD)		Subject area, Code	
Phone		E-mail	

The Sending Institution

Name	Erasmus Universiteit Rotterdam	Faculty	
Erasmus code (if applicable)	NL ROTTERD01	Department	International Office EUR
Address	Burg. Oudlaan 50 3062 PA Rotterdam	Country, Country code	The Netherlands NL
Contact person faculty/school name		Contact person E-mail / phone	

The Receiving Organisation/Enterprise

Name Sector ¹		Department	
Address, website		Country	
Size of enterprise <input type="checkbox"/> < 250 employees <input type="checkbox"/> > 250 employees			
Contact person name / position		Contact person e-mail / phone	
Mentor ² name / position		Mentor e-mail / phone	

Section to be completed BEFORE THE MOBILITY PART I

PROPOSED MOBILITY PROGRAMME

Planned period of the mobility: from [month/year] till [month/year]
Number of working hours per week: ...
Traineeship title: ...
Detailed programme of the traineeship period...
Knowledge, skills and competences to be acquired by the trainee at the end of the traineeship ...
Monitoring plan ...
Evaluation plan ...

Language competence of the trainee The level of language competence in [<i>workplace main language</i>] that the trainee already has or agrees to acquire by the start of the mobility period is: (ask international office faculty) according to the European Framework 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"/>

The sending institution

The institution undertakes to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships.

[Please fill in only one of the following boxes depending on whether the traineeship is embedded in the curriculum or is a voluntary traineeship.]

The traineeship is <u>embedded in the curriculum</u> and upon satisfactory completion of the traineeship, the institution undertakes to: <ul style="list-style-type: none"> • Award ECTS credits. • 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. • 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"/>
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The traineeship is <u>voluntary</u> and upon satisfactory completion of the traineeship, the institution undertakes to: <ul style="list-style-type: none"> • Award ECTS credits: Yes <input type="checkbox"/> No <input type="checkbox"/>
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If yes, please indicate the number of ECTS 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), except if the trainee is a recent graduate.
- Record the traineeship in the trainee's Europass Mobility Document Yes No *This is recommended if the trainee will be a recent graduate.*

The receiving organisation/enterprise

The trainee will receive a financial support for his/her traineeship: Yes No

If yes, amount in EUR/month:

The trainee will receive a contribution in kind for his/her traineeship: Yes No

If yes, please specify:

Is the trainee covered by the accident insurance? 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

Is the trainee covered by a liability insurance? Yes No

The receiving organisation/enterprise undertakes to ensure that appropriate equipment and support is available to the trainee.

Upon completion of the traineeship, the organisation/enterprise undertakes to issue a Traineeship Certificate by [*maximum 5 weeks after the traineeship*].

COMMITMENT OF THE THREE PARTIES

By signing this document, the trainee, the sending institution and the receiving organisation/enterprise confirm that they approve the proposed Learning Agreement and that they will comply with all the arrangements agreed by all parties.

The trainee and receiving organisation/enterprise will communicate to the sending institution any problem or changes regarding the traineeship period.

The trainee	
Trainee's signature	Date:
The sending institution	
Responsible person's signature	Date:
The receiving organisation/enterprise	
Responsible person's signature	Date:

Section to be completed DURING THE MOBILITY**EXCEPTIONAL MAJOR CHANGES TO THE ORIGINAL LEARNING AGREEMENT****PART II****EXCEPTIONAL CHANGES TO THE PROPOSED MOBILITY PROGRAMME**

Planned period of the mobility: from [month/year] till [month/year]
Number of working hours per week: ...
Traineeship title: ...
Detailed programme of the traineeship period...
Knowledge, skills and competences to be acquired by the trainee at the end of the traineeship ...
Monitoring plan ...
Evaluation plan ...

The trainee, the sending institution and the receiving organisation/enterprise confirm that the proposed amendments to the mobility programme are approved.

Approval by e-mail or signature from the trainee, the responsible person in the sending institution and the responsible person in the receiving organisation/enterprise.

Section to be completed AFTER THE MOBILITY PART III

TRAINEESHIP CERTIFICATE

Name of the trainee:

Name of the receiving organisation/enterprise:

Sector of the receiving organisation/enterprise:

Address of the receiving organisation/enterprise [*street, city, country, phone, e-mail address*], website:

Start and end of the traineeship:

from [*day/month/year*] till [*day/month/year*]

Traineeship title:

Detailed programme of the traineeship period including tasks carried out by the trainee:

Knowledge, skills (intellectual and practical) and competences acquired (learning outcomes achieved):

Evaluation of the trainee:

Date:

Name, signature and stamp of the responsible person at the receiving organisation/enterprise:

Name, signature and stamp of the responsible person at the sending organisation:

¹ The list of top-level **NACE sector codes** is available at:

http://ec.europa.eu/eurostat/ramon/nomenclatures/index.cfm?TargetUrl=LST_NOM_DTL&StrNom=NA CE_REV2&StrLanguageCode=EN.

² **Mentor:** the role of the mentor is to provide support, encouragement and information to the trainee on the life and experience relative to the enterprise (culture of the enterprise, informal codes and conducts, etc.). Normally, the mentor should be a different person than the supervisor.