COME SI COMPILA IL LEARNING AGREEMENT FOR TRAINEESHIP

Trainee	Last name(s)	First name(s)	Date of birth	Nationality	Sex [M/F]	Study cycle*	Field of education**

Sending Institution	Name	Faculty/ Department	Erasmus code (if applicable)	Address	Country	Contact person name; email; phone	
	UNIVERSITY OF FLORENCE	SCHOOL OF ENGINEERING	I FIRENZE01	Via di Santa Marta, 3 – 50139 Firenze	ITALY	Prof. ……………*** International@ingegneria.unifi.it +39 055 2758987	

Receiving Organisation /Enterprise	Name	Department	Address; website	Country	Size	Contact person name; position; e-mail; phone	Mentor name; position; e-mail; phone
					☐< 250 employees ☐> 250 employees		

*indicare EQF level 6 per chi frequenta la Laurea Triennale, EQF level 7 per chi frequenta la Laurea Magistrale oppure EQF level 8 per chi frequenta il dottorato

**Indicare uno dei seguenti codici in base all'area di riferimento:
071 Engineering and Engineering Trades
0713 Electricity and Energy
0714 Electronics and Automation
0715 Mechanics and Metal Trades
0732 Building and Civil Engineering
061 Information and Communication Technologies

***Indicare il nome del Coordinatore Erasmus del proprio corso di studi (vedi tabella)

Before the mobility

Table A - Traineeship Programme at the Receiving Organisation/Enterprise
Planned period of the mobility: from [month/year] …………… to [month/year] …………….*
Traineeship title: … TITOLO DEL TIROCINIO | **Number of working hours per week:** … ORE DI LAVORO PER SETTIMANA
Detailed programme of the traineeship: PROGRAMMA DETTAGLIATO DELL'ATTIVITA' CHE SI ANDRA' A SVOLGERE
Knowledge, skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes):   CONOSCENZE ED ABILITA' CHE SI ACQUISIRANNO DURANTE ILTIROCINIO
Monitoring plan: PROGRAMMA DI MONITORAGGIO DEL TIROCINIO
Evaluation plan: COME SI SVOLGERA' LA VALUTAZIONE FINALE DEL TIROCINIO

*indicare il periodo indicativo dello svolgimento del tirocinio

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* ☐

*indicare il livello di conoscenza della lingua già in possesso oppure quella che si vuole acquisire

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 ☐	

2. 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☐	

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 ☐ 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 Sending Institution will provide an accident insurance to the trainee (if not provided by the Receiving Organisation/Enterprise): 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 Sending Institution will provide a liability insurance to the trainee (if not provided by the Receiving Organisation/Enterprise): Yes ☐ No ☐	

*indicare una delle 3 soluzioni: se è un tirocinio curriculare compilare il numero 1 indicando i crediti che devono essere acquisiti e mettere un flag su "Final Report. Se è un tirocinio post laurea compilare il nr. 3 e quindi mettere un flag su NO sui crediti da acquisire. Per quanto riguarda i PhD compilare invece il numero 2 indicando se ci sono crediti da acquisire.

**mettere un flag su SI per tutte le domande

Table C - Receiving Organisation/Enterprise *

The Receiving Organisation/Enterprise will provide financial support to the trainee for the traineeship: Yes ☐ No☐	If yes, amount (EUR/month): ………..
The Receiving Organisation/Enterprise will provide a contribution in kind to the trainee for the traineeship: Yes ☐ No☐ If yes, please specify: ….	
The Receiving Organisation/Enterprise will provide an accident insurance to the trainee (if not provided by the Sending Institution): 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/Enterprise will provide a liability insurance to the trainee (if not provided by the Sending Institution): Yes ☐ No ☐	
The Receiving Organisation/Enterprise will provide appropriate support and equipment to the trainee.	
Upon completion of the traineeship, the Organisation/Enterprise undertakes to issue a Traineeship Certificate within 5 weeks after the end of the traineeship.	

*questa tabella deve essere compilata dall'Istituto Ospitante

By signing this document, the trainee, the Sending Institution and the Receiving Organisation/Enterprise 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/Enterprise will communicate to the Sending Institution any problem or changes regarding the traineeship period.The Sending Institution and the trainee should also commit to what is set out in the Erasmus+ grant agreement. The institution undertakes to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships (or the principles agreed in the partnership agreement for institutions located in Partner Countries).

Commitment	Name	Email	Position	Date	Signature
Trainee			*Trainee*		
Responsible person at the Sending Institution*					
Supervisor at the Receiving Organisation					

*indicare il nome del Coordinatore Erasmus come sulla prima pagina