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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Trainee** | | **Last name(s)** | | **First name(s)** | **Date of birth** | | **Nationality** | | | **Sex [M/F]** | | **Study cycle** | | **Field of education** | |
| Wprowadź nazwisko | | Wprowadź imię | Wprowadź datę urodzenia | | Wprowadź obywatelstwo | | | ☐ Female  ☐ Male | | Wprowadź poziom studiów | | Wprowadź kod  dziedziny studiów | |
| **Sending Institution** | | **Name** | | **Faculty/ Department** | **Erasmus code** (if applicable) | | **Address** | | | **Country** | | **Contact person name; email; phone** | | | |
| Lodz University of Technology (TUL) | | Wprowadź nazwę jednostki PŁ w jęz. ang. | PL LODZ02 | | Wprowadź adres | | | PL | | Dane dostępne na stronie erasmus.p.lodz.pl | | | |
| **Receiving** **Organisation/Enterprise** | | **Name** | | **Department** | **Address; website** | | **Country** | | | **Size** | | **Contact person name; position; e-mail; phone** | | **Mentor name; position;**  **e-mail; phone** | |
| Pełna nazwa instytucji przyjmującej w języku angielskim | | Nazwa jednostki w instytucji przyjmującej (jeśli dotyczy) | Adres instytucji; Adres strony internetowej | | Lista dostępna na stronie www.iso.org | | | ☐ < 250 employees  ☐ > 250 employees | | Imię i nazwisko osoby kontaktowej w instytucji przyjmującej; funkcja;  adres e-mail; numer telefonu | | Imię i nazwisko opiekuna/mentora w instytucji przyjmującej; funkcja;  adres e-mail; numer telefonu | |
| **Before the mobility** | | | | | | | | | | | | | | | |
|  | ***Table A - Traineeship Programme at the Receiving Organisation/Enterprise*** | | | | | | | | | | | | | | |
| **Planned period of the mobility: from [day/month/year] ……………. to [day/month/year] …………….** | | | | | | | | | | | | | | | |
| **Traineeship title: …** | | | | | | | | | | **Number of working hours per week: … (min. 35 hours)** | | | | | |
| **Detailed programme of the traineeship: (tasks and deliverables to be presented in weeks or phases including min. introduction/middle/concluding phase)**  **Traineeship in digital skills:** Yes ☐ No ☐ | | | | | | | | | | | | | | | |
| **Knowledge**, **skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes) :** | | | | | | | | | | | | | | | |
| ☐ academic skills  ☐ adaptability skills  ☐ analytical skills  ☐ communication skills  ☐ decision-making skills  ☐ foreign language skills  ☐ ICT skills  ☐ initiative skills | | | | | | | | | ☐ innovative and creative skills  ☐ strategic-organisational skills  ☐ teamwork skills  ☐ other skills:  ……………………………………………………………………………………..………………………………………  ……………………………………………………………………………………………………………..………………  ………………………………………………………………………………………………………………..…………… | | | | | | |
| **Monitoring plan:**  **In a receiving institution (to be filled in by host coordinator):**  **At Lodz University of Technology**  (Reports to be sent to Faculty E+ Coordinator/Supervisor. First report to be sent after 1 month; mid-term report to be sent if mobility takes longer than 3 months; final report when traineeship is completed. Reports to be signed before sending to TUL by coordinator at host institution). | | | | | | | | | | | | | | | |
| **Evaluation plan:**  **In a receiving institution (to be filled in by host coordinator):**  **At Lodz University of Technology**  (student reports to be signed by host coordinator, traineeship certificate, on-line report form, poster presentation (if applicable at the Faculty)) | | | | | | | | | | | | | | | |
|  |  | |  | | |  | |  | | |  |  |  | |  |
| **(To be filled in by host coordinator)** 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* ☐ | | | | | | | | | | | | | | | |

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| ***Table B - Sending Institution***  *Indicate one of the following three boxes:*  ☐ Traineeships embedded in the curriculum (counting towards the degree);  ☐ Voluntary traineeships (not obligatory for the degree);  ☐ Traineeships for recent graduates  ***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)[[1]](#endnote-1) | Give a grade based on: Traineeship certificate ☒ Final report ☒ Interview ☐  Poster presentation ☐ | | 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 ☒ | |  1. 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 ☐  Poster presentation ☐ | | | 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 ☒ | | |  1. 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 ☒  **Provision of accident, liability and medical insurance is student’s responsibility.** | 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 ☒ | | | | | | | |
| ***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 after the end of the traineeship.** | | | | | | | | |
| 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 and**  **stamp** |
| Trainee |  |  | *Trainee* |  |  |
| Faculty Erasmus+ Coordinator at TUL/Supervisor at IDS TUL |  |  |  |  |  |
| Vice-Dean for Student Affairs/Training Coordinator Programme at IDS TUL |  |  |  |  |  |
| Supervisor[[2]](#endnote-2) at the Receiving Organisation |  |  |  |  |  |

1. [↑](#endnote-ref-1)
2. [↑](#endnote-ref-2)