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Erasmus+
Enriching lives, opening minds.
Funded by the European Union

Informationen zum Ausfüllen:

Das Learning Agreement ist Bestandteil des Fördervertrags. Es wird digital auf Englisch, Deutsch, Französisch, Spanisch oder Italienisch ausgefüllt. Die Reihenfolge der Unterschriften muss eingehalten werden.

Von Seiten der Hochschule muss das Learning Agreement von einer Lehrkraft aus dem Fachbereich unterschrieben werden, die berechtigt ist, den Inhalt des Praktikums fachlich zu beurteilen. Die Qualität des Praktikums und die Anerkennung durch die Hochschule werden durch die Unterschrift bestätigt.

1. Der/die **Studierende** trägt zunächst am PC die Angaben zu seiner/ihrer Person und zur Hochschule (S.1)

2. Das Dokument wird per E-Mail an das **Unternehmen** weitergeleitet und dort ebenfalls am PC ausgefüllt (The Receiving Organisation, Tabelle A und C). Anschließend wird das Dokument mit Unterschrift und Stempel digital an den/die Studierende/n zurückgeschickt.

3. der/die Studierende unterschreibt selbst und leitet es an die **Hochschule** weiter, wo es von der Lehrkraft (siehe oben) ausgefüllt (Tabelle B), unterschrieben und gestempelt wird.

Dear Receiving Organisation / Enterprise,

This LEARNING AGREEMENT documents the content of the internship you are offering. The programme, scope and range of tasks and mentoring should demonstrate a level of expertise relevant to the student's field of studies and suitable to the duration of the internship.
It serves as a contract between all of the signing parties. Therefore, if any changes in duration or content occur, please contact our office immediately.

After the student has filled in his/her personal information and those of the university on page 1, please fill in the following sections on the computer:

1. All information concerning the **Receiving Organisation/ Enterprise** (1st page)
2. All of the questions in **Table A** (possible in English, German, French, Italian or Spanish) and **Table C.**
3. Sign and stamp the agreement on behalf of the Receiving Organisation/ Enterprise (page 5).

Please send the signed document digitally back to the student, who will sign it and forward it to his/her university for Table B and the signature.

On the part of the university, the agreement must be signed by a teacher from the department who is authorised to assess the content of the internship. The quality of the internship and its recognition by the university are confirmed by the signature.

If you have questions do not hesitate to contact us.

For more explicit guidelines and codes, please see
https://erasmus-plus.ec.europa.eu/resources-and-tools/mobility-and-learning-agreements/learning-agreements/traineeships-agreement-guidelines-ka131#about.

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Learning Agreement
Student Mobility for Traineeships

The Trainee

Last name(s)		First name(s)	
Date of birth		Male ☐ Female ☐ Undefined ☐	
Phone		E-Mail	
Nationality[1]		Study cycle[2]	
Field of education[3]			

The Sending Institution

Name			
Erasmus code[4]		Faculty	
Address		Department	
		Country	
Contact person[5]			
Name		Phone	
		E-mail	

The Receiving Organisation/Enterprise

Name		Department	
Address (Street, Post code, City)		Sector / Field of acitivity	
Country		Website	
Public Body ☐ Non-Profit ☐ under 250 employees ☐		Number of employees	
Contact person[6]			
Name		Phone	
Position		E-mail	
Mentor[7]			
Name		Phone	
Position		E-mail	

[1] **Nationality**: Country to which the person belongs administratively and that issues the ID card and/or passport.
[2] **Study cycle:** Short cycle (EQF level 5) / Bachelor or equivalent first cycle (EQF level 6) / Master or equivalent second cycle (EQF level 7) / Doctorate or equivalent third cycle (EQF level 8).
[3] **Field of education**: The ISCED-F 2013 search tool available at http://ec.europa.eu/education/tools/isced-f_en.htm should be used to find the ISCED 2013 detailed field of education and training that is closest to the subject of the degree to be awarded to the trainee by the sending institution.
[4] **Erasmus code**: a unique identifier that every higher education institution that has been awarded with the Erasmus Charter for Higher Education (ECHE) receives. It is only applicable to higher education institutions located in Programme Countries.
[5] **Contact person at the Sending Institution**: a person who provides a link for administrative information and who, depending on the structure of the higher education institution, may be the departmental coordinator or will work at the international relations office or equivalent body within the institution.
[6] **Contact person at the Receiving Organisation**: a person who can provide administrative information within the framework of Erasmus+ traineeships.
7 **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.

BEFORE THE MOBILITY

Table A - Traineeship Programme at the Receiving Organisation/ Enterprise

Period of the physical component: from [ ] **to** [ ] If applicable, planned period of the virtual component: [ ] to [ ] Please enter the first and the last working day. Please note that the training period must be at least 2 months = 60 days!	
Number of working hours per week: Please note that the internship must be a full-time position and working hours may not exceed 40 hours per week.	
Number of working days per week:	
Number of permanent staff in the department:	
Number of other interns/trainees in the department:	
Traineeship title:	
Detailed program of the traineeship period, including the virtual component, tasks and timetable on how the intern will be introduced to the tasks: *Please be specific	

Traineeship in digital skills[8]: Yes ☐ No ☐

Knowledge, skills and competences to be acquired by the trainee at the end of the traineeship (expected Learning Outcomes):
*Please be specific

Monitoring plan:
*Please describe how/when the trainee will be monitored and supervised during his/her traineeship.

Evaluation plan:
*Please describe what criteria will be used to evaluate the traineeship period

Language competence of the trainee:
The level of language competence[9] in _____ (main language of work) that the trainee already has or agrees to acquire by the start of the mobility period is:

Language Level: A1 ☐ A2 ☐ B1 ☐ B2 ☐ C1 ☐ C2 ☐ Native Speaker ☐

[8] **Traineeship in digital skills:** any traineeship where trainees receive training and practice in at least one or more of the following activities:
- digital marketing (e.g. social media management, web analytics);
- digital graphical, mechanical or architectural design;
- development of apps, software, scripts, or websites;
- installation, maintenance and management of IT systems and networks;
- cybersecurity;
- data analytics, mining and visualisation;
- programming and training of robots and artificial intelligence applications

Generic customer support, order fulfilment, data entry or office tasks are not considered in this category.

[9] Level of language competence: a description of the European Language Levels (CEFR) is available at:
https://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr

Table B – The Sending Institution

Please use only one of the following three boxes[10]:

1) The **traineeship is embedded in the curriculum** and upon satisfactory completion of the traineeship, the institution undertakes to:

- Award ☐ ECTS[11] 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[12]: 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[12]: 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: Yes ☐ No ☐
  If yes, please indicate the number of ECTS credits (or equivalent): ☐
- Record the traineeship in the trainee's Europass Mobility Document[12] (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 ☒

10 There are three different provisions for traineeships:
1. Traineeships embedded in the curriculum (counting towards the degree);
2. Voluntary traineeships (not obligatory for the degree);
3. Traineeships for recent graduates

11 **ECTS credits or equivalent:** in countries where the "ECTS" system it is not in place, "ECTS" needs to be replaced in all tables by the name of the equivalent system that is used and a web link to an explanation to the system should be added.
12 More information about the Europass: www.europass-info.de

Table C – The Receiving Organisation/Enterprise

The Receiving Organisation/Enterprise will provide **financial support** to the trainee for the traineeship:
Yes ☐ No ☐ If yes, amount in EUR/month (net amount): ☐

The Receiving Organisation/Enterprise will provide a **contribution** in kind to the trainee for the traineeship (i.e. accommodation, free meals, language lessons, etc.): 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.

COMMITMENT OF THE FOUR PARTIES

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.

The Receiving Organisation/enterprise

Supervisor at the Receiving Organisation/enterprise[13]:

Name: _____ Position: _____
E-mail: _____ Phone: _____

Responsible person's signature and **stamp**: _____ Date: _____

[13] **Supervisor at the Receiving Organisation:** this person is responsible for signing the Learning Agreement, amending it if needed, supervising the trainee during the traineeship and signing the Traineeship Certificate. The name and email of the Supervisor must be filled in only in case it differs from that of the Contact person mentioned at the top of the document.

The Trainee

Name: _____ Position: Trainee

Signature:

_____ Date: _____

The Sending Institution

Responsible person in the Sending Institution[14]:

Name: _____ Function: _____
E-mail: _____ Phone: _____

Responsible person's signature and **stamp**: _____ Date: _____

The project coordinating institution (mobility consortium)

The contact person in the consortium:
Name: Meike Johann
Function: project coordinator
Phone: +49 651 8103 236

Address:
a.i.m. rlp – Agentur für internationale *Hochschul*-Mobilität Rheinland-Pfalz
c/o Hochschule Trier, Postfach 1826; 54208 Trier, Germany
E-Mail: erasmuspraktika@hochschule-trier.de; Homepage: www.erasmuspraktika.de

Signature and stamp: _____ Date: _____

[14] **Responsible person in the Sending Institution**: this person is responsible for signing the Learning Agreement, amending it if needed and recognising the credits and associated learning outcomes on behalf of the responsible academic body as set out in the Learning Agreement. The name and email of the Responsible person must be filled in only in case it differs from that of the Contact person mentioned at the top of the document.