



Anhang I – zum Grant Agreement

## STAFF MOBILITY FOR TRAINING MOBILITY AGREEMENT

| (Title) Last Harrie, First H                 | arrie             |             |      |                          |                                |  |
|--|-------------------|-------------|------|--------------------------|--------------------------------|--|
| Seniority (Years of experience) <sup>2</sup> |                   |             |      | Nationality <sup>3</sup> |                                |  |
| □ <10 years □ 10                             | 0-20 years        | □ >20 years | 6    |                          |                                |  |
| Sex  |                   |             |      | Academic                 | ; year                         |  |
| □ female □ male                              |                   |             |      | 2019/2020                |                                |  |
| E-mail                                       |                   |             |      |                          |                                |  |
| THE RECEIVING                                | GINSTIT           | UTION       |      |                          |                                |  |
| Contact person name                          |                   |             |      | Contact person position  |                                |  |
| Contact person e-mail                        |                   |             |      | Contact person phone     |                                |  |
| Receiving <b>PART</b>                        | NER UNIVE         | RSITY:      |      |                          |                                |  |
| Name   |                   |             |      |                          |                                |  |
| ErasmusCODE Fa                               |                   |             | Facu | culty/Department         |                                |  |
|  |                   |             |      |                          |                                |  |
|  |                   |             |      |                          |                                |  |
| Public Body?                                 | Body? Non-Profit? |             |      |                          | Number of Employees below 250? |  |
| □ YES  | □ NO              |             | S i  | □ NO                     | □ YES □ NO                     |  |
| Legal Address                                | of Partner Uni    | versity     |      |                          |                                |  |
| City   | City              |             |      | Post Code                |                                |  |
| Country                                      | Country           |             |      | Region                   |                                |  |
| Email  |                   |             | ٦    | Telephone                |                                |  |
| Website                                      | Website           |             | 7    | Type of Organisation     |                                |  |

For guidelines, please look at the end notes on page 3.





## THE SENDING INSTITUTION

| Name<br>Ivan Franko National Univer   | rsity of Lviv                      |                      |  |  |  |  |  |
|---|------------------------------------|----------------------|--|--|--|--|--|
| Address   | •                                  |                      | Type of enterprise: NACE code <sup>7</sup> |  |  |  |  |
|   |                                    | >                    |  |  |  |  |  |
| Contact person name   | Contact person name Contact Person |                      | Faculty/Department                         |  |  |  |  |
| Contact person e-mail   |                                    | Contact person ph    | Contact person phone                       |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
| Section to be con   | npleted B                          | SEFORE THE M         | MOBILITY                                   |  |  |  |  |
| I. PROPOSED MOBILITY PROGRAMME  |                                    |                      |  |  |  |  |  |
| Planned period of the Training (STT) /Teaching activity (STA) (dd/mm/yyyy)  |                                    |                      |  |  |  |  |  |
| from till   |                                    |                      |  |  |  |  |  |
| Duration (days) – excluding travel days   |                                    | Language of training | ng   |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
| Overall objectives of the   | mobility:                          |                      |  |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
| Added value of the mol tionalisation strategies   |                                    |                      | nodernisation and interna-                 |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
| Activities carried out/field of training/STA teaching- teaching hours planned                                       |                                    |                      |  |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
| Expected outcomes and   | l impact (e.                       | a. on the develor    | oment of ioint project.                    |  |  |  |  |
| Expected outcomes and impact (e.g. on the development of joint project, the staff member and on both institutions): |                                    |                      |  |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |
|   |                                    |                      |  |  |  |  |  |





## II. COMMITMENT OF THE THREE PARTIES

By signing<sup>8</sup> this document, the staff member on training, the sending institution/enterprise and the receiving institution confirm that they approve the proposed mobility agreement.

The sending higher education institution supports the staff mobility as part of its modernisation and internationalisation strategy and will recognise it as a component in any evaluation or assessment of the staff member.

The staff member will share his/her experience, in particular its impact on his/her professional development and on the sending higher education institution, as a source of inspiration to others.

The staff member and the sending institution commit to the requirements set out in the grant agreement signed between them.

The staff member and the receiving institution will communicate to the sending institution/enterprise any problems or changes regarding the proposed mobility programme or mobility period.

| The staff member                   |           |  |  |  |
|------------------------------------|-----------|--|--|--|
| Name                               | Signature |  |  |  |
|                                    |           |  |  |  |
|                                    |           |  |  |  |
|                                    |           |  |  |  |
| The sending institution            |           |  |  |  |
| Name                               | Signature |  |  |  |
| Erasmus+ Departamental Coordinator |           |  |  |  |
|                                    | •         |  |  |  |
| The receiving institution          |           |  |  |  |
| Name of the responsible person     | Signature |  |  |  |
|                                    |           |  |  |  |
|                                    |           |  |  |  |
|                                    |           |  |  |  |

<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> All references to "enterprise" are only applicable to mobility for staff between Programme Countries or within Capacity Building projects.

<sup>&</sup>lt;sup>5</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 Programme Countries.

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

<sup>&</sup>lt;sup>7</sup> The top-level NACE sector codes are available at <a href="http://ec.europa.eu/eurostat/ramon/nomenclatures/index.cfm?TargetUrl=LST\_NOM\_DTL&StrNom=NACE\_REV2">http://ec.europa.eu/eurostat/ramon/nomenclatures/index.cfm?TargetUrl=LST\_NOM\_DTL&StrNom=NACE\_REV2</a> & StrLanguageCode=EN

<sup>&</sup>lt;sup>8</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 Partner Countries; the national legislation of the Programme Country).