LLP-Erasmus Programme

Individual training Programme for Staff training mobility

academic year 2012/ 2013

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| --- | --- | --- | --- |
| Name of the staff member |  | | |
| Home institution (name and Erasmus code)/Enterprise and department |  | | |
| Name of the contact person  at the sending institution |  | | |
| Position of the contact person  at the sending institution |  | | |
| Type of host enterprise (sector NACE code) |  | | |
| Host institution (name and Erasmus code)/Enterprise and department |  | | |
| Name of the contact person  at the receiving institution |  | | |
| Position of the contact person  at the receiving institution |  | | |
| Duration of the training (days) |  | | |
| Arrival date |  | Departure date |  |
| Overall objectives of the training |  | | |
| Added value of the mobility (both for the home institution and for the staff member) |  | | |
| Activities to be carried out (if possible: the programme for the period) |  | | |
| Expected results (for the participant, the home institution/enterprise, the host institution/enterprise) |  | | |

*Place and date* *Signature of the Beneficiary*

**Approval of the work plan**

|  |  |  |
| --- | --- | --- |
| *For the home institution* |  | *For the host institution* |

*Name and signature Name and signature*