

TRAINEESHIP AGREEMENT

I. IDENTIFICATION DETAILS

THE TRAINEE

Last name (s)		First name (s)	
Date of birth		Nationality	
Sex [M/F]		Semester, year	WS/SS/AY 201x-201x+1
Study cycle	<i>bachelor/master/doctoral</i>	Field of study code	
Phone		E-mail	

THE SENDING INSTITUTION

Name & Erasmus ID	Brno University of Technology	Faculty, dpt.	
Full address		Country	Czech Republic
Contact person			
Full name, position, contact			

THE RECEIVING ORGANIZATION/ENTERPRISE

Organisation name			
Full address		Website	
Size of enterprise	<input type="checkbox"/> Small (<50 staff) <input type="checkbox"/> Medium (51-500 staff) <input type="checkbox"/> Large (> 500 staff)	Country	
Contact person			
Full name, position, contact			
Mentor			
Full name, position, contact			

II. PROPOSED MOBILITY PROGRAMME

Mobility start date: dd/mm/yyyy	Mobility end date: dd/mm/yyyy
Number of working hours per week: <i>(must be a full-time equivalent in a host country, e.g. 40 hrs/week)</i>	
Traineeship title: <i>(the name or short description of the trainee position)</i>	
Detailed programme of the traineeship period: <i>Description of the <u>specific</u> tasks, day-to-day duties and responsibilities, timetable of activities etc.</i>	

Knowledge, skills and competences to be acquired by the trainee at the end of the traineeship:

Monitoring plan:

Description of the role of the mentor and supervisor of the trainee, how the trainee will be given feedback throughout the duration of the traineeship, quality assessment, the reporting of towards the sending institution etc

Evaluation plan:

How the final assessment of the trainee's performance will take place at the end of traineeship.

Language competence of the trainee

The level of language competence in that the trainee already has or agrees to acquire by the start of the mobility period is: A1 A2 B1 B2 C1 C2

THE SENDING INSTITUTION

The institution undertakes to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships. Depending on whether the traineeship is embedded in the curriculum or it is a voluntary traineeship, the sending institution undertakes to award recognition of the traineeship by **at least one** of the following ways:

The traineeship is:

1. embedded in the trainee's curriculum, i.e. **COMPULSORY**
2. not embedded in the trainee's curriculum, i.e. **VOLUNTARY**

In terms of academic recognition, the sending institution undertakes to:

- Award ECTS or equivalent credits: YES NO ; if YES, how many:
- Give a grade YES NO ; if YES 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: YES NO
- Record the traineeship in the trainee's Europass Mobility Document: YES NO

With regards to the insurance, the sending institution undertakes to:

- **Provide an accident insurance** YES NO ; if YES, it shall cover:
 - Accidents during travels for work purposes YES NO
 - Accidents on way to/from work YES NO
- **Provide a liability insurance** YES NO

THE RECEIVING INSTITUTION

The receiving institution undertakes to:

- Provide a financial support to the trainee: YES NO ; if YES, the amount in EUR/month:
- Provide another contribution in kind to the trainee: YES NO ; if YES, please specify:

- **Provide an accident insurance** YES NO ; if YES, it shall cover:
 - Accidents during travels for work purposes YES NO
 - Accidents on way to/from work YES NO

- **Provide a liability** insurance YES NO

- Provide appropriate support and equipment to the Trainee.
- **Upon completion of the Traineeship issue a Traineeship Certificate** or equivalent, declaring the actual duration of the traineeship, its outcomes and evaluating student's performance. This document has to be delivered in **original form** to the sending institution **no later than 15 days** after the end of the traineeship.

III. COMMITMENT OF THE THREE PARTIES

By signing this document, the trainee, the sending institution and the receiving organisation/enterprise confirm that they approve the proposed Traineeship 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.

	<i>Full name, position (if appl.)</i>	<i>Date</i>	<i>Signature(s)</i>
Trainee			
Sending institution representative(s)			
Receiving institution representative(s)			