Save PDF locally on your PC before filling in (do not edit in browser). Find examples and guidance on our website. Please get Adobe Acrobat Reader here and fill in the Learning Agreement electronically!





LEARNING AGREEMENT FOR TRAINEESHIPS GRADUATES

Erasmus Traineeship 2022-2024

I. THE THREE PARTIES The Trainee	 To be filled in by the Trainee To be filled in by the Sending Institution To be filled in by the Receiving Organisation
Last name(s):	First name(s):
Date of birth:	Nationality ⁽¹⁾ :
Gender: male female diverse	Phone:
E-mail:	
Study cycle:	
Code (Field of Education ⁽²⁾):	Academic year:

The Sending Institution (University)

Name of Institution	:	
Erasmus Code:		
Address:		
	Country: Germany	
Faculty:	International Office	
Responsible Contac	Responsible Contact Person ⁽³⁾ :	

The Receiving Organisation/Enterprise

Name of Institution:		
Department: [if applicable] Address: Street:		
Postal Code:	City:	Size: <250
Country:		[Number of empolyees] >250
Website:		

(1) Country to which the person belongs administratively and that issues the ID card and/or passport.

(2) Choose a four-digit <u>ISCED-Code from our official list</u>, that is closest to your field of education and enter it in your Learning Agreement.

(3) Responsible contact person at 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. It is 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 (e.g. Prüfungsamt, placement coordinator, Erasmus coordinator, professor ...). <u>Please</u> choose a person from our official list.

Contact person ⁽⁴⁾ at Organisation:
Position/Function:
Phone:
E-mail:
Mentor ⁽⁵⁾ : [if different from supervisor]
Position/Function:
Phone:
E-mail:

II. DETAILS OF THE TRAINEESHIP PROGRAMME Duration

Period of the Mobility [day/month/year]:	Start:	End:	
Number of working hours per week:		Vacation: [days/month]	

*Please note that the traineeship must be a full-time position (min. 30h/week)

Contents/Tasks⁽⁶⁾

Detailed programme of the traineeship:				
• Traineeship in digital skills ⁽⁷⁾ :	Yes	No		

(4) Contact person (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. He or she can also provide administrative information within the framework of Erasmus+ traineeships.

(5) 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.

(6) To find out what has to be described here, see model version (Musterbeispiele) on our website.

(7) 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. 2 Generic customer support, order fulfilment, data entry or office tasks are not considered in this category.

• Knowledge, skills and competences t the traineeship (expected Learning o	o be acquired by the trainee at the end of utcomes):
Monitoring Plan (Betreuung):	
Monitoring Plan (Betreuung):	
• Evaluation Plan (Feedback):	
Language competence of the traine	ee
The main working language(s) is (are):	
The level of language competence ⁽⁸⁾ t acquire by the start of the mobility perio	hat the trainee already has or agrees to od is:
Language:	Level:
Language:	Level:
Language:	Level:

(8) Here you find a description of the Common European Framework of Reference for Languages (CEFR).

III. THE SENDING INSTITUTION

Recognition

The traineeship is carried out by a recent graduate and, upon satisfactory completion of the traineeship, the institution undertakes to:		
1) Award ECTS credits (or equivalent)	Yes	No
If yes, number of	credits:	
2) Record the traineeship in the trainee's Europass Mobility Do	cument. Yes	No
Please note: The Office for Erasmus traineeships Saxony-Anl will issue the graduate a EUROPASS Mobility.	halt	

Insurance

The Sending Institution will provide a liability insurance to the trainee.	Yes	No
The Sending Institution will provide an accident insurance to the trainee.	Yes	No

IV. THE RECEIVING ORGANISATION/ENTERPRISE

Salary

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The Receiving Institution will provide financial support to the trainee for the traineeship:		Yes	No
	If yes, amount (€/month)		
Other contribution in kind (e.g. free accommodation, bonus, food and meals, public transport, etc.):		Yes	No
Please specify:			
Having a value of approx.:	€/month		

Insurance

The Receiving Institution will provide a liability insurance (damages caused by the trainee at the workplace) to the trainee.		Yes	No
The Receiving Institution will provide an accident insurance (damages caused to the trainee at the workplace) to the trainee.		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	

IV. COMMITMENT OF THE THREE PARTIES

By signing this document, the trainee, the Sending Institution an 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 the Receiving Organisation/ Enterprise will collaborate with the Coordinating Institution (Office for Erasmus traineeships Saxony-Anhalt⁽⁹⁾) and communicate to the Coordinating Institution and Sending Institution any problem or changes regarding the mobility period. The Coordinating 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 Trainee

Date:	Signature:	

The Sending Institution

Name of responsible contact person: Position/Function: E-mail:		
Phone: Date:	Signature:	

The Receiving Organisation/Enterprise

We agree to make use of the above student's knowledge and skills and provide him/her with tasks and responsibilities appropriate to his/her qualifications and experience. We will provide the trainee with appropriate equipment and support.			
Upon completion of the traineeship the Organisation/Entenecessary documents for recognition of the placement by Institution as well as a Reference Letter or the EU-Trainee completed Euroskills-Questionnaire within 1 week after the trainee. We confirm that we are not an official body/agency of the institution does not administer Community programmes of the EU.	the trainee's Sending ship Certificate and the ship. he EU and/or that our		
Name of contact person:			
Date: Signature:			