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 **STUDENTS**

Erasmus Traineeship 2022-2024

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

The Sending Institution (University)

Name of Institution:
Erasmus Code:
Address:
Country: Germany
Faculty:
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 ISCED-Code from our official list, 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 ...). Please 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 traine	eeship:		
•	Traineeship in digital skills ⁽⁷⁾ :	Yes	No	
(4)	Contact person (Supervisor) at the Receiving Organi		person is reenensible for signing the	Loorning Agroomont

(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 the traineeship (expected Learning	to be acquired by the trainee at the end of outcomes):
•	Monitoring Plan (Betreuung):	
•	Evaluation Plan (Feedback):	
Laı	nguage competence of the train	ee
т	he main working language(s) is (are):	
	he level of language competence ⁽⁸⁾ cquire by the start of the mobility per	that the trainee already has or agrees to iod is:
La	anguage:	Level:
La	anguage:	Level:
La	anguage:	Level:

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

III. THE SENDING INSTITUTION

Recognition

[Please fill in only one of the following boxes.]

A) The traineeship is embedded in the curriculum (counting towards the degree) and, upon satisfactory completion of the traineeship, the institution undertakes to:		
Award ECTS credits	number of credits:	
Give a grade based on:	Traineeship certificate	
	Final report	
	Interview	
Record the traineeship in the traineeship in the field of the traineeship in the trainees	he trainee's Transcript of Records and Diploma Supplement	

OR

B)	The traineeship is voluntary (not obligatory for the degree) and, completion of the traineeship, the institution undertakes to record in the trainee's Diploma Supplement (or equivalent).		
	Moreover, the institution will:		
	1) Award ECTS credits:	Yes	No
	If yes, number of credits	:	
	2) Give a grade :	Yes	No
	If yes, please indicate if it will be based on: Traineeship certificate	e	
	Final report		
	Interview		
	3) Record the traineeship in the trainee's Transcript of Records .	Yes	No

Record the traineeship in the trainee's Europass Mobility Document ⁽⁹⁾ .	Yes	No	
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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

The Receiving Institution will provide financial support to 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⁽¹⁰⁾) 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:
Date.	

The Sending Institution

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

The Receiving Organisation/Enterprise

him/her with tasks ar	e of the above student's knowledge and skills and provide nd responsibilities appropriate to his/her qualifications and de the trainee with appropriate equipment and support.		
necessary documents for Institution as well as completed Euroskills-Que We confirm that we a	he traineeship the Organisation/Enterprise will provide the or recognition of the placement by the trainee's Sending a Reference Letter or the EU-Traineeship Certificate and the stionnaire within 1 week after the traineeship. In not an official body/agency of the EU and/or that our hister Community programmes of the EU.		
Name of contact person:			
Date:	Signature:		