

Να συμπληρωθούν όλα τα πεδία που είναι υπογραμμισμένα με κίτρινο από εσάς για ότι αφορά προσωπικά σας στοιχεία. Καλό είναι να συμπληρώσετε και αυτά που αφορούν την επιχείρηση εάν τα γνωρίζετε πριν το στείλετε

Higher Education Learning Agreement for Traineeships

Academic Year 201../201...

	Last name(s)	First name(s)	Date of birth	Nationality ¹	Sex [M/F]	Study cycle ²	Field of education ³
Trainee							
	Name	Faculty/ Department	Erasmus code ⁴ (if applicable)	Address	Country	Contact person name ⁵ ; email; phone	
Sending Institution	Cyprus University of Technology www.cut.ac.cy	Research and International Collaboration International Mobility Unit	CY LIMASSO02	P.O.BOX 50329 3603 LIMASSOL - CYPRUS	Cyprus	Dr. Charalambos Christostomou Erasmus Institutional Coordinator c.christostomou@cut.ac.cy + 357 25 00 25 38 Contact Person Erasmus Office outgoing@cut.ac.cy + 357 25 00 25 87	
	Name	Department	Address; website	Country	Size	Contact person ⁶ name; position; e-mail; phone	Mentor ⁷ name; position; e-mail; phone
Receiving Organisation/Enterprise					<input type="checkbox"/> < 250 employees <input type="checkbox"/> > 250 employees		

Comment [AI1]: e.g. CY, GR etc

Comment [AI3]:

- 1) Nursing/Midwifery : 0913
- 2) Com. and Internet studies : 0610
- 3) Engineering 0710
- 4) Mech. Eng. : 0710
- 5) Civil eng. : 0732
- 6) Agriculture : 0810
- 7) Business management : 0410
- 8) Tourism management : 1015
- 9) Environmental Studies : 0521
- 10) Multimedia and graphic : 0610
- 11) Fine Arts : 0213

Link for codes : <http://bit.ly/2tWydDz>

Comment [AI2]: 1st(for bachelor)
2nd (for master)
3rd(for PhD)

Before the mobility

Table A - Traineeship Programme at the Receiving Organisation/Enterprise

Planned period of the mobility: from [day/month/year] to [day/month/year]

Traineeship title:

Number of working hours per week: 35-40

Detailed programme of the traineeship:

Comment [AI4]: Θα γράψετε τις ακριβείς ημερομηνίες τοποθέτησης σας στον οργανισμό (ημέρα/μήνα). Η ημέρα έναρξης και λήξης δεν θα πρέπει να είναι σαββατοκυριακό ή αργία.

Comment [AI5]: Λεπτομερής περιγραφή των καθηκόντων/εργασιών που έχουν συμφωνηθεί



Higher Education Learning Agreement for Traineeships

Academic Year 201../201...

Knowledge, skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes):

(relevant to the content of the placement)

Monitoring plan: (e.g. daily/weekly/ reporting)

Evaluation plan:

The trainee will need to have a complete, signed and stamped TRAINEESHIP CERTIFICATE at the end of the Placement period on behalf of the Host Institution.

The Trainee will need to complete an activities logbook for each month of the placement signed at the end of each month by the responsible person at the Host Company/Organization and forwarded to outgoing@cut.ac.cy

The **level of language** competence⁸ in _____ [indicate here the main language of work] that the trainee already has or agrees to acquire by the start of the mobility period is: A1 A2 B1 B2 C1 C2
Native speaker

Comment [A16]: Διευκρινίστε ποια ξένη γλώσσα θα χρησιμοποιείται στον οργανισμό φιλοξενίας και το γνωστικό σας επίπεδο.

. EN, DE,FR,IT,SP,DN

Table B - Sending Institution

Please use only one of the following three boxes:

The traineeship is embedded in the curriculum and upon satisfactory completion of the traineeship, the institution undertakes to:

Award ECTS credits (or equivalent) <input type="checkbox"/> No <input type="checkbox"/>	Give a grade based on: Traineeship certificate <input type="checkbox"/> Final report <input type="checkbox"/> Interview <input type="checkbox"/>
Record the traineeship in the trainee's Transcript of Records and Diploma Supplement (or equivalent).	
Record the traineeship in the trainee's Europass Mobility Document: Yes <input type="checkbox"/> No <input type="checkbox"/>	

The traineeship is voluntary and, upon satisfactory completion of the traineeship, the institution undertakes to:

Award ECTS credits (or equivalent): Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please indicate the number of credits: .../.
Give a grade: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please indicate if this will be based on: Traineeship certificate <input type="checkbox"/> Final report <input type="checkbox"/> Interview <input type="checkbox"/>
Record the traineeship in the trainee's Transcript of Records: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Record the traineeship in the trainee's Diploma Supplement (or equivalent).	
Record the traineeship in the trainee's Europass Mobility Document:	

The traineeship is carried out by a recent graduate and, upon satisfactory completion of the traineeship, the institution undertakes to:

Award ECTS credits (or equivalent): Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please indicate the number of credits:
Record the traineeship in the trainee's Europass Mobility Document (highly recommended): Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Accident insurance for the trainee



<p>The Sending Institution will provide an accident insurance to the trainee (if not provided by the Receiving Organisation/Enterprise):</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>The trainee is responsible to have in place prior to the start of the mobility adequate insurance coverage during the whole duration of his/ her mobility period. Basic coverage is provided by the national health insurance of the participant as well during his/her stay in another EU country through the European Health Insurance Card. Apart from the European health card, the participant should also provide a copy of a Private Health Insurance, covering from death, permanent disability, medical expenses and loss and damage, repatriation expenses as well as liability damage.</p>	<p>The accident insurance will cover:</p> <p>- accidents during travels made for work purposes: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>- accidents on the way to work and back from work: Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>The Sending Institution will provide a liability insurance to the trainee (if not provided by the Organisation/Enterprise):</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Liability insurance coverage covering damages caused by the student/graduate at the workplace, must be provided on the part of the trainee (included in the insurance scheme)</p>	

Table C - Receiving Organisation/Enterprise

<p>The Receiving Organisation/Enterprise will provide financial support to the trainee for the traineeship: Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>If yes, amount (EUR/month):</p>
<p>The Receiving Organisation/Enterprise will provide a contribution in kind to the trainee for the traineeship: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please specify:</p>	
<p>The Receiving Organisation/Enterprise will provide an accident insurance to the trainee (if not provided by the Sending Institution):</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>The accident insurance covers:</p> <p>- accidents during travels made for work purposes: Yes <input type="checkbox"/> No <input type="checkbox"/> - accidents on the way to work and back from work: Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>The Receiving Organisation/Enterprise will provide a liability insurance to the trainee (if not provided by the Sendi</p>	

Comment [A17]: Εάν ο οργανισμός σας δίνει κάποια αμοιβή παρακαλώ όπως διευκρινιστεί το ποσό



Higher Education Learning Agreement for Traineeships

Academic Year 201../201...

Institution): Yes <input type="checkbox"/> No <input type="checkbox"/>
The Receiving Organisation/Enterprise will provide appropriate support and equipment to the trainee.
Upon completion of the traineeship, the Organisation/Enterprise undertakes to issue a Traineeship Certificate within 5 weeks after the end of the traineeship.

By signing this document, the trainee, the Sending Institution and 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 Receiving Organisation/Enterprise will communicate to the Sending Institution any problem or changes regarding the traineeship period. The Sending 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 (or the principles agreed in the partnership agreement for institutions located in Partner Countries).

Commitment	Name	Email	Position	Date	Signature and stamp
Trainee			Trainee		
Responsible person at the Sending Institution	Dr. Charalambos Chrisostomou	outgoing@cut.ac.cy	Erasmus Institutional Coordinator		
Supervisor at the Receiving Organisation					

Comment [A18]: Ηλεκτρονική υπογραφή σας

Comment [A19]: Υπογραφή και σφραγίδα υπεύθυνου ατόμου στον οργανισμό υποδοχής



Higher Education Learning Agreement for Traineeships

Academic Year 201../201...

¹ **Nationality:** Country to which the person belongs administratively and that issues the ID card and/or passport.

² **Study cycle:** Short cycle (EQF level 5) / Bachelor or equivalent first cycle (EQF level 6) / Master or equivalent second cycle (EQF level 7) / Doctorate or equivalent third cycle (EQF level 8).

³ **Field of education:** The [ISCED-F 2013 search tool](http://ec.europa.eu/education/tools/iscsed-f_en.htm) available at http://ec.europa.eu/education/tools/iscsed-f_en.htm should be used to find the ISCED 2013 detailed field of education and training that is closest to the subject of the degree to be awarded to the trainee by the sending institution.

⁴ **Erasmus code:** a unique identifier that every higher education institution that has been awarded with the Erasmus Charter for Higher Education (ECHE) receives. It is only applicable to higher education institutions located in Programme Countries.

⁵ **Contact person at the sending institution:** 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.

⁶ **Contact person at the Receiving Organisation:** a person who can provide administrative information within the framework of Erasmus+ traineeships.

⁷ **Mentor:** 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.

⁸ **Level of language competence:** a description of the European Language Levels (CEFR) is available at: <https://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>

⁹ **ECTS credits or equivalent:** in countries where the "ECTS" system it is not in place, in particular for institutions located in Partner Countries not participating in the Bologna process, "ECTS" needs to be replaced in all tables by the name of the equivalent system that is used and a weblink to an explanation to the system should be added.