**GENERAL INFORMATION**

|  |  |  |
| --- | --- | --- |
| **Applicant** | **Last name(s)** |  |
| **First name(s)** |  | **Sex** |  Male Female |
| **Date of birth** |  | **Nacionality** |  |
| **Study Cicle [[1]](#endnote-1)**  |  |

|  |  |
| --- | --- |
| **Sending Institution** | **Universitat Politècnica de Catalunya (UPC)** |
| **Faculty/ Department** | BARCELONA SCHOOL OF INFORMATICS (FIB) |
| **Address** | C/Jordi Girona, 1-3 Edifici B6 Campus Nord 08034 Barcelona | **Country** | SPAIN |
| **Contact person name[[2]](#endnote-2)** | Carolina Martín |
| **Position** | International Relations Officer |
| **Phone** | +34 93 401 71 16 | **e-mail:** | rel.int@fib.upc.edu |

|  |  |  |
| --- | --- | --- |
| **Receiving Organization/ Enterprise** | **Name of host institution** |  |
| **Department** |  |
| **Address** |  |
| **City** |  | **Country** |  |
| **website** |  |
| **Size of organisation/enterprise** |  <250 employees >250 employees |
| **Contact person name[[3]](#endnote-3)** |  |
| **Position** |  |
| **Phone** |  | **e-mail:** |  |
| **Mentor name [[4]](#endnote-4)** |  |
| **Position** |  |
| **Phone** |  | **e-mail:** |  |

**BEFORE THE MOBILITY**

**Table A - Traineeship programme at the Receiving Organisation/Enterprise**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Planned period of the mobility**  | From: | to: | Number of working hours per week |  |
| (month/year) | (month/year) |
| **Traineeship programme** |
|  |
| **Knowledge, skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes)** |
|  |
| **Monitoring plan (brief description)** |
|  |
| **Evaluation plan (brief description)** |
|  |

**Main language of work**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| The level [[5]](#endnote-5) of language competence 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 |

**Table B – Sending Institution**

(please use only **one** of the following three boxes)

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

|  |  |
| --- | --- |
| **Award ECTS[[6]](#endnote-6) credits (or equivalent):** | Yes [ ]  No [ ]  (Not applicable to PhD level) |
| **If yes, please indicate the number of credits:** |  |
| **Give a grade based on**:(Not applicable to PhD level) | 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 (or equivalent):** | Yes [ ]  No [ ]  |

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

|  |  |
| --- | --- |
| **Award ECTS credits (or equivalent):** | Yes [x]  No [ ]   |
| **If yes, please indicate the number of credits:** | 18 ECTS |
| **Give a grade:** | Yes [x]  No [ ]   |
| **If yes, give a grade based on**: | Traineeship certificate [ ]  Final report [x]  Interview [x]  |
| **Record the traineeship in the trainee's Transcript of Records**: | Yes [x]  No [ ]  |
| **Record the traineeship in the trainee's Diploma Supplement (or equivalent):** | Yes [x]  No [ ]  |

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

(Not applicable to PhD level)

|  |  |
| --- | --- |
| **Award ECTS credits (or equivalent):** | Yes [ ]  No [ ]   |
| **If yes, please indicate the number of credits:** |  |

**Accident insurance for the trainee** (if not provided by the Receiving Organisation/Enterprise)

|  |  |
| --- | --- |
| **The Sending Institution will provide an accident insurance to the applicant:**  | Yes [ ]  No [x]  |
| **If yes, 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 [ ]  |
| **The Sending Institution will provide a liability insurance to the applicant** (except USA, Canada and Mexico)**:**  | Yes [x]  No [ ]  |

The trainee has to hire an insurance policy that covers accidents for the entire training period if it is required by the receiving organisation/enterprise rules or country legislation.

**Table C – Receiving Organisation/Enterprise**

|  |  |
| --- | --- |
| **The Receiving Organisation/Enterprise will provide financial support to the applicant for the traineeship:**  | Yes ☐ No ☐  |
| If yes, amount (EUR/month): |  |
| **The Receiving Organisation/Enterprise will provide a contribution in kind to the applicant for the traineeship:**  | Yes ☐ No ☐  |
| If yes, please specify: |  |
| **The Receiving Organisation/Enterprise will provide appropriate support and equipment to the applicant.** |
| **Upon completion of the traineeship, the Organisation/Enterprise undertakes to issue a Traineeship Certificate within 5 weeks after the end of the traineeship.** |

**Accident insurance for the trainee**

|  |  |
| --- | --- |
| **The Receiving Organisation/Enterprise will provide an accident insurance to the applicant** (if not provided by the Sending Institution): | Yes ☐ No ☐  |
| **If yes, 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 ☐  |
| **The Receiving Organisation/Enterprise will provide a liability insurance to the applicant (if not provided by the Sending Institution):**  | Yes ☐ No ☐  |

**Commitment**

By signing this document, the applicant, the Sending Institution and the Receiving Organisation/Enterprise confirm that they approve the Training Agreement and that they will comply with all the arrangements agreed by all parties. The applicant and Receiving Organisation/Enterprise will communicate to the Sending Institution any problem or changes regarding the traineeship period. The Sending Institution and the applicant should also commit to what is set out in the agreement. The institution undertakes to respect all the principles agreed in the partnership agreement.

With his or her signature, the thesis Director/Mobility coordinator confirms that the stay is appropriate for the study programme.

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant** | Name |  | signature |
| e-mail |  |
| Position | Applicant |
| Date |  |
| **Responsible person [[7]](#endnote-7) at the Sending Institution** | Name | María Teresa Abad Soriano | signature |
| e-mail | rel.int@fib.upc.edu |
| Position | Vice-dean for Students |
| Date |  |
| **Supervisor [[8]](#endnote-8) at the receiving organisation /enterprise** | Name |  | Signature |
| e-mail |  |
| Position |  |
| Date |  |

1. **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). [↑](#endnote-ref-1)
2. **Contact person at the sending institution**: 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 works at the international relations office or equivalent body within the institution. [↑](#endnote-ref-2)
3. **Contact person at the Receiving Organisation:** a person who can provide administrative information within the framework of traineeships. [↑](#endnote-ref-3)
4. **Mentor:** the role of the mentor is to provide support, encouragement and information to the applicant 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. [↑](#endnote-ref-4)
5. **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. [↑](#endnote-ref-5)
6. **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 web link to an explanation to the system should be added. [↑](#endnote-ref-6)
7. **Responsible person at the sending institution**: this person is responsible for signing the Training 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 Training Agreement. The name and email of the Responsible person must be filled in only in case it differs from that of the Contact person mentioned at the top of the document. [↑](#endnote-ref-7)
8. **Supervisor at the Receiving Organisation**: this person is responsible for signing the Training Agreement, amending it if needed, supervising the trainee during the traineeship and signing the Traineeship Certificate. The name and email of the Supervisor must be filled in only in case it differs from that of the Contact person mentioned at the top of the document. [↑](#endnote-ref-8)