

Higher Education Learning Agreement for Traineeships

The Trainee

Last name(s)	XXX	Sex (M/F)	XXX
First name(s)	XXX	Study cycle ⁱ	XXX
Date of birth	XXX	Field of education ⁱⁱ	XXX
Nationality ⁱⁱⁱ	XXX		

The Sending Institution

Name	XXX	Address	XXX
Faculty/ Department	XXX	Country	XXX
Erasmus code ^{iv} (if applicable)	XXX	Contact person ^v (name, email, phone)	XXX

The Receiving organization/enterprise

Name	University of Antwerp	Size	<input type="checkbox"/> < 250 employees <input checked="" type="checkbox"/> > 250 employees
Department	Faculty of Medicine and Health Sciences	Erasmus code (if applicable)	B ANTWERP01
Address & Website	Prinsstraat 13, 2000 Antwerpen www.uantwerp.be	Contact person ^{vi} (name; position; e-mail; phone)	International Office Medhealth; international.office.medhealth@uantwerp.be
Country	Belgium	Mentor ^{vii} (name; position; e-mail; phone)	

Before the mobility

Table A - Traineeship Programme at the Receiving Organisation/Enterprise

Planned period of the mobility: from « » to « »	
Traineeship title: XXX	Number of working hours per week: XXX
Detailed programme of the traineeship: XXX	
Knowledge, skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes): XXX	
Monitoring plan: XXX	
Evaluation plan: XXX	
The level of language competence ^{viii} in English [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 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> Native speaker <input type="checkbox"/>	

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Table B - Sending Institution

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

Award XXX ECTS credits (or equivalent) ^x	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).	

Accident insurance for the trainee

The Sending Institution will provide an accident insurance to the trainee (if not provided by the Receiving Organisation/Enterprise): Yes <input checked="" type="checkbox"/>	The accident insurance covers: - accidents during travels made for work purposes: Yes <input checked="" type="checkbox"/> - accidents on the way to work and back from work: Yes <input checked="" type="checkbox"/>
The Sending Institution will provide a liability insurance to the trainee: Yes <input checked="" type="checkbox"/>	

Table C - Receiving Organisation/Enterprise

The Receiving Organisation/Enterprise will provide financial support to the trainee for the traineeship: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, amount (EUR/month):
The Receiving Organisation/Enterprise will provide a contribution in kind to the trainee for the traineeship: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify:	
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
Trainee	X X X	X X X	X X	X X X	X X X
Responsible person at the Sending Institution*	X X X	X X X	X X	X X X	X X X
Supervisor at the Receiving Organisation ^x	Prof. Jean-Pierre Van Geertruyden	jean-pierre.vangeertruyden@uantwerpen.be	Departmental Coordinator		

This document has to be signed by all parties concerned. You can print the last page, but this is not necessary.

Higher Education

Learning Agreement for Traineeships

ⁱ **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).

ⁱⁱ **Field of education:** The [ISCED-F 2013 search tool](http://ec.europa.eu/education/tools/isced-f_en.htm) available at http://ec.europa.eu/education/tools/isced-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.

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

^{iv} **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.

^v **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.

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

^{vii} **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.

^{viii} **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>

^{ix} **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.

^x **Responsible 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. 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.

^{xi} **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. 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.