**Mobility Agreement**

**Student Mobility for Traineeships/Research**

**General information**

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|  **Student** | **Last name(s)** | **First name(s)** | **Date of birth** | **Nationality[[1]](#endnote-1)** | **Gender [Male/Female]** | **Level of education(EQF level)**[[2]](#endnote-2) | **Field of education**[[3]](#endnote-3) **(ISCED code)** |
|  |  |  |  |  | EQF7 |  |
| **Sending Institution**  | **Name** | **Faculty/ Department** | **City** | **Country** | **Contact person[[4]](#endnote-4) name; position; email** |
| Semmelweis University | Medicine | Budapest | Hungary | Nóra Dr. Schreiberné Seres;INSTITUTIONAL MOBILITY COORDINATOR;pannonia@semmelweis.hu |
| **Receiving Institution/** **Organisation** | **Name** | **Faculty/ Department** | **City** | **Country** | **Contact person[[5]](#endnote-5) name; position; email** |
|  |  |  |  |  |
| **Before the mobility** |
| ***Table A - Mobility Programme at the Receiving Institution/Organisation*** |
| **Planned period of the mobility: from [day/month/year] ……………. to [day/month/year] …………….** |
| **Type of mobility: Traineeship** ☐ **Research** ☐ |
| **Traineeship title:** **Number of working hours per week:** | **Research title/goal:**  |
| **Detailed programme of the mobility:** |
| **Knowledge**, **skills and competences to be acquired by the end of the mobility (expected learning outcomes):** |
| **Monitoring plan:** |
| **Evaluation plan:** |
| The level of **language competence[[6]](#endnote-6)** in \_\_\_\_\_\_\_\_ [*indicate here the main language of work/research*] that the student already has or agrees to acquire by the start of the mobility period is:*A1* ☐ *A2* ☐ *B1* ☐ *B2* ☐ *C1* ☐ *C2* ☐ *Native speaker* ☐ |
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| ***Table B - Sending Institution****Please use only one of the following three boxes:* **[[7]](#endnote-7)** |
| 1. The traineeship/research is **embedded in the curriculum** and upon satisfactory completion of the mobility, the institution undertakes to:

|  |  |  |
| --- | --- | --- |
| Award ……...… ECTS credits (or equivalent)[[8]](#endnote-8) | Give a grade based on: Traineeship/Research certificate ☐ Final report ☐ Interview ☐ |  |
| Record the mobility in the student’s Transcript of Records and Diploma Supplement (or equivalent). |  |

1. The traineeship/research is **voluntary** and, upon satisfactory completion of the mobility, the institution undertakes to:

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| --- | --- | --- |
| Award ECTS credits (or equivalent): Yes ☐ No ☐ |  If yes, please indicate the number of credits: …. |  |
| Give a grade: Yes ☐ No ☐ | If yes, please indicate if this will be based on: Traineeship/Research certificate ☐ Final report ☐ Interview ☐ |  |
| Record the mobility in the student’s Transcript of Records: Yes ☐ No ☐ |  |
| Record the mobility in the student’s Diploma Supplement (or equivalent). |  |

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

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| Award ECTS credits (or equivalent): Yes ☐ No ☐ | If yes, please indicate the number of credits: …. |  |

**Accident insurance for the student *(applicable only in case of traineeship)***

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| The sending institution will provide an accident insurance to the trainee (if not provided by the Receiving Institution/Organisation): 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 ☐ |
| The sending institution will provide a liability insurance to the trainee (if not provided by the Receiving Institution/Organisation): Yes ☐ No ⌧ |

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| ***Table C - Receiving Institution/Organisation (applicable only in case of traineeship)*** |
| The Receiving Institution/Organisation will provide financial support to the trainee for the traineeship: Yes ☐ No ☐ | If yes, amount (EUR/month): ……….. |
| The Receiving Institution/Organisation will provide a contribution in kind to the trainee for the traineeship: Yes ☐ No ☐ | If yes, please specify: ………. |
| The Receiving Institution/Organisation will provide an accident insurance to the trainee (if not provided by the sending institution): 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 ☐ |
| The Receiving Institution/Organisation will provide a liability insurance to the trainee (if not provided by the sending institution): Yes ☐ No ☐ |
| The Receiving Institution/Organisation will provide appropriate support and equipment to the trainee. |
| Upon completion of the traineeship, the Receiving Institution/Organisation undertakes to issue a traineeship certificate within 5 weeks after the end of the traineeship. |
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| By signing this document, the student, the sending institution and the receiving institution or organisation confirm that they approve the learning agreement and that they will comply with all the arrangements agreed by all parties. The student and the receiving institution or organisation will communicate to the sending institution any problem or changes regarding the mobility period. |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Student |  |  | *Student* |  |  |
| Responsible person[[9]](#endnote-9) at the sending institution | Nóra Schreiberné Seres | pannonia@semmelweis.hu | Institutional Coordinator |  |  |
| Responsible person at theSending Institution |  | - |  |  |  |
| Responsible person[[10]](#endnote-10) at the receiving institution/organisation |  |  |  |  |  |

**During the Mobility**

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| ***Table A2 - Exceptional Changes to the Mobility Programme at the Receiving Institution***/***Organisation***(to be approved by e-mail or signature by the student, the responsible person in the sending institution and the responsible person in the receiving institution or organisation) |
| **Planned period of the mobility: from [day (optional)/month/year] ……………. till [day (optional)/month/year] …………….** |
| **Type of mobility: Traineeship** ☐ **Research** ☐ |
| **Traineeship title:**  | **Research goal/title:** |
| **Number of working hours per week:** |
| **Detailed programme of the mobility period:** |
| **Knowledge**, **skills and competences to be acquired by the end of the traineeship (expected learning outcomes)**: |
| **Monitoring plan:** |
| **Evaluation plan:** |

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| By signing this document, the student, the sending institution and the receiving institution or organisation confirm that they approve the learning agreement and that they will comply with all the arrangements agreed by all parties. The student and the receiving institution or organisation will communicate to the sending institution any problem or changes regarding the mobility period.  |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Student |  |  | *Student* |  |  |
| Responsible person at the sending institution |  |  |  |  |  |
| Responsible person at the receiving institution/organisation |  |  |  |  |  |

**After the Mobility**[applicable only in case of traineeship][[11]](#endnote-11)

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| ***Table D – Traineeship Certificate by the Receiving Institution/Organisation*** |
| **Name of the student:** |
| **Name of the Receiving Institution/Organisation:** |
| **Sector of the Receiving Institution/Organisation:** |
| **Address of the Receiving Institution/Organisation** [street, city, country, e-mail address]**, website:** |
| **Start date and end date of the complete mobility: from [day/month/year] …………………. to [day/month/year] ……………….** |
| **Traineeship title:** |
| **Detailed programme of the mobility period including tasks carried out by the student:** |
| **Knowledge, skills (intellectual and practical) and competences acquired (achieved learning outcomes):** |
| **Evaluation of the student:** |
| **Date:** |
| **Name and signature of the responsible person at the Receiving Institution/Organisation:** |

1. **Nationality**: Country to which the person belongs administratively and that issues the ID card and/or passport. [↑](#endnote-ref-1)
2. **Level of education:** Bachelor or equivalent first cycle (EQF level 6) / Master or equivalent second cycle (EQF level 7) / Doctorate or equivalent third cycle (EQF level 8). EQF level codes 6 to 8 are equivalent to the ISCED levels 6 to 8. [↑](#endnote-ref-2)
3. **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. [↑](#endnote-ref-3)
4. **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 works at the international relations office or equivalent body within the institution. [↑](#endnote-ref-4)
5. **Contact person at the receiving institution or organisation**: a person who can provide administrative information within the framework of the Pannónia Scholarship Programme. [↑](#endnote-ref-5)
6. **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-6)
7. **There are three different provisions for traineeships/research**:

1. Traineeships/research embedded in the curriculum (counting towards the degree);

2. Voluntary traineeships/research (not obligatory for the degree);

3. Traineeships for recent graduates. [↑](#endnote-ref-7)
8. **ECTS credits or equivalent**: in countries where the "ECTS" system it is not in place, "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-8)
9. **Responsible person at the sending institution**: this person is responsible for signing the learning agreement, amending it if needed 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. [↑](#endnote-ref-9)
10. **Responsible person at the receiving institution or organisation**: this person is responsible for signing the learning agreement, amending it if needed, supervising the student during the mobility and signing the Traineeship Certificate. 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-10)
11. **In case of student mobility for research purposes**: after the mobility period, the student must prepare a research report, which includes the activities and results of the mobility period. The report will be approved by the responsible person at the sending institution. The receiving institution/organisation shall only approve the actual mobility period. [↑](#endnote-ref-11)