

Trainee	Last name(s)	First name(s)	Date of birth	Nationality ¹	Sex [M/F]	Study cycle ²	Field of education ³
	Numele dvs.	Prenumele dvs.	Data nașterii dvs.	Consultați nota 1 din anexa fromularului	Sexul dvs.	Consultați nota 2 din anexa fromularului	Consultați nota 3 din anexa fromularului
Sending Institution	Name	Faculty/ Department	Erasmus code ⁴ (if applicable)	Address	Country	Contact person name ⁵ ; email; phone	
	Alexandru Ioan Cuza University of Iași	Facultatea dvs.	RO IASI02	Carol I Blvd, Nr.11, 700506 Iasi	Romania	Petronela SPIRIDON petronela.spiridon@uaic.ro +40 232 20 18 12	
Receiving Organisation /Enterprise	Name	Department	Address; website	Country	Size	Contact person ⁶ name; position; e-mail; phone	Mentor ⁷ name; position; e-mail; phone
	Numele instituției gazdă	Numele departamentului în care veți face practică	Adresa institutiei gazda	Tara unde veti efectua stagiul	<input type="checkbox"/> < 250 employees <input type="checkbox"/> > 250 employees	Consultați nota 6 din anexa fromularului	Consultați nota 7 din anexa fromularului

Before the mobility

Table A - Traineeship Programme at the Receiving Organisation/Enterprise

Planned period of the mobility: from [month/year] luna/201x to [month/year]] luna/201x

Traineeship title: Intership in xxx Department (numele departamentului)	Number of working hours per week: xx hours/week (completați cu numărul de ore de practică pe săptămână)
Detailed programme of the traineeship: - Completați cu programul de lucru, respectiv cu activitățile ce urmează să le desfășurați la instituția gazdă	
Knowledge, skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes): - Completați cu competențele, abilitățile și cunoștințele ce urmează să le dobândeți în urma desfășurării activităților ce urmează să le desfășurați la instituția gazdă	
Monitoring plan: - Se precizează modul în care activitatea dvs. va fi monitorizată de către supervisorul pe care îl veți avea la instituția gazdă	
Evaluation plan: - Se specifică planul de evaluare a activității dvs. ca stagiar (evaluare săptămânală/lunară/finală)	

The level of **language competence**⁸ in English (sau limba instituției gazdă) [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

Table B - Sending Institution

Please use **only one** of the following three boxes:⁹

!!!Atenție se va completa doar unul din cazurile de mai jos, în funcție de situația dvs.

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

Award ... de indicat numărul de credite ..ECTS credits (or equivalent) ¹⁰ Relevant for ECTS credits at the following UAIC Courses: Se precizează și disciplinele pentru care va fi recunoscut numărul de credite precizat la finalizarea cu succes a stagiului.	During the mobility:
	Seminar projects are covered Yes <input type="checkbox"/> No <input type="checkbox"/> Seminar tests are covered Yes <input type="checkbox"/> No <input type="checkbox"/> Practical courses are covered Yes <input type="checkbox"/> No <input type="checkbox"/> Laboratory activities are covered Yes <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"/>
Erasmus+ coordinator signature: semnătura coordonatorului Erasmus+	Erasmus+ coordinator signature:
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"/>	

2. 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 checked="" type="checkbox"/> No <input type="checkbox"/>	If yes, please indicate the number of credits: 5 (sau alt număr în funcție de caz)
Record the traineeship in the trainee's Europass Mobility Document (<i>highly recommended</i>): Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
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"/> No <input type="checkbox"/>	The accident insurance covers: - accidents during travels made for work purposes: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> - accidents on the way to work and back from work: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
The Sending Institution will provide a liability insurance to the trainee (if not provided by the Receiving Organisation/Enterprise): Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Table C - Receiving Organisation/Enterprise

!!! Acest tabel se completează se către reprezentanții instituției gazdă

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 an accident insurance to the trainee (if not provided by the Sending Institution): Yes <input type="checkbox"/> No <input type="checkbox"/>	The accident insurance covers: - 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"/>
The Receiving Organisation/Enterprise will provide a liability insurance to the trainee (if not provided by the Sending 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
Trainee			<i>Trainee</i>	<i>data</i>	<i>semnatura</i>
Responsible person ¹¹ at the Sending Institution	Numele și prenumele coordonatorului ERASMUS+ de la facultatea dvs.	Adresa email coordonator ERASMUS+	ERASMUS+ Coordinator	data	semnatura
Supervisor ¹² at the Receiving Organisation	Consultați nota 12 din anexa formularului	Adresa email supervisor	Funcția supervisorului	data	semnatura

During the Mobility

!!!Această secțiune se completează doar dacă apar modificări pe perioada desfășurării stagiului

Table A2 - Exceptional Changes to the Traineeship Programme at the Receiving Organisation/Enterprise (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 Organisation/Enterprise)	
Planned period of the mobility: from [month/year] till [month/year]	
Traineeship title: ...	Number of working hours per week: ...
Detailed programme of the traineeship period:	
Knowledge, skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes):	
Monitoring plan:	
Evaluation plan:	

After the Mobility

!!!Această secțiune se completează la finalul stagiului de către supervisorul dvs. de la instituția gazdă

Table D - Traineeship Certificate by the Receiving Organisation/Enterprise	
Name of the trainee:	
Name of the Receiving Organisation/Enterprise:	
Sector of the Receiving Organisation/Enterprise:	
Address of the Receiving Organisation/Enterprise [street, city, country, phone, e-mail address], website:	
Start date and end date of traineeship: from [day/month/year] to [day/month/year]	
Traineeship title:	
Detailed programme of the traineeship period including tasks carried out by the trainee:	
Knowledge, skills (intellectual and practical) and competences acquired (achieved Learning Outcomes):	

Evaluation of the trainee:

Date:

Name and signature of the Supervisor at the Receiving Organisation/Enterprise:

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- 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 **There are three different provisions for traineeships:**
1. Traineeships embedded in the curriculum (counting towards the degree);
 2. Voluntary traineeships (not obligatory for the degree);
 3. Traineeships for recent graduates.
- ¹⁰ **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.
- ¹¹ **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.
- ¹² **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.