



## Mobility Agreement Staff Mobility For Training<sup>1</sup>

Con formato: Justificado

Planned period of the training activity: from [day/month/year] till [day/month/year]

Duration (days) – excluding travel days: .....

### The Staff Member

Last name:	
First name and all initials:	
Seniority <sup>2</sup>	
Date of birth: ...../...../.....	
Gender: M / F	Nationality:
Academic Year: 20...../ 20.....	
E-mail	

### The Sending Institution/Enterprise

Name of home institution:	
EUC number of home institution:	
Erasmus Identity Code of home institution:	
Address:	
Country:	
<b>Responsible person in the sending institution</b>	
Name:	Function:
E-mail address:	Telephone number:

### The Receiving Institution

Name of host institution: <b>EASDI. Escuela de Arte y Superior de Diseño de Corella</b>	
Erasmus Identity Code of host institution: <b>E LOGRONO19</b>	
Address: <b>SANTA BÁRBARA 2, 31591 CORELLA. NAVARRA</b>	
Country: <b>SPAIN</b>	
Department/unit: <b>Graphic Design</b>	
<b>Responsible person in the receiving institution:</b>	
Name: <b>Prof. Laura Sáez Ponzoni</b>	Function: <b>Head of Internacional affairs</b>
E-mail: <b>eacorell-a.internacional@educacion.navarra.es</b>	Telephone nº: <b>+34 948 782 016</b>



## Section to be completed BEFORE THE MOBILITY

### I. PROPOSED MOBILITY PROGRAMME

Language of training: .....

**Overall objectives of the mobility:**

**Added value of the mobility (in the context of the modernisation and internationalisation strategies of the institutions involved):**

**Activities to be carried out:**

**Expected outcomes and impact (e.g. on the professional development of the staff member and on both institutions):**



**II. COMMITMENT OF THE THREE PARTIES**

By signing<sup>3</sup> this document, the staff member, the sending institution and the receiving institution/enterprise confirm that they approve the proposed mobility agreement.

The sending higher education institution supports the staff mobility as part of its modernisation and internationalisation strategy and will recognise it as a component in any evaluation or assessment of the staff member.

The staff member will share his/her experience, in particular its impact on his/her professional development and on the sending higher education institution, as a source of inspiration to others.

The staff member and the beneficiary institution commit to the requirements set out in the grant agreement signed between them.

The staff member and the receiving institution/enterprise will communicate to the sending institution any problems or changes regarding the proposed mobility programme or mobility period.

<b>The staff member</b>	
Name:	
Signature:	Date:

<b>The sending institution/enterprise</b>	
Name of the responsible person:	
Signature:	Date:

<b>The receiving institution</b>	
Name of the responsible person:	
Signature:	Date:

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<sup>1</sup> In case the mobility combines teaching and training activities, **the mobility agreement for teaching template** should be used and adjusted to fit both activity types.

<sup>2</sup> **Seniority:** Junior (approx. < 10 years of experience), Intermediate (approx. > 10 and < 20 years of experience) or Senior (approx. > 20 years of experience).

<sup>3</sup> Circulating papers with original signatures is not compulsory. Scanned copies of signatures or electronic signatures may be accepted, depending on the national legislation of the country of the sending institution (in the case of mobility with Partner Countries: the national legislation of the Programme Country). Certificates of attendance can be provided electronically or through any other means accessible to the staff member and the sending institution.