



ERASMUS+ LEARNING AGREEMENT FOR TRAINEESHIPS

CALL 2024-2025

I. THE PARTS

TRAINEE									
LAST NAME(s)			FIRST NAME(s)						
DATE of BIRTH			NATIONALITY						
NIA	ID Card (NIF) or Passport	GENDEF	2						
		Male		Female		Undefined			
LEVEL OF EDUCATION (EQF level)		FIELD of	FEDUCAT	ION (<u>chec</u>	<u>k here</u>)				
Bachelor(EQF level 6), Master (EQF level 7), Doctorate (EQF									
level 8):									

BENEFICIARY ORGANISATION (SAME AS SENDING INSTITUTION)					
NAME		ERASMUS CODE			
UNIVERSITAT POMPEU FABRA		E BARCELO 15			
ADDRESS	COUNTRY				
C/ de la Mercè 12, 08002 Barcelona	SPAIN				
CONTACT PERSON (Name and surnames)	POSITION				
Mar Lluís Dixon	Head of Careers Service				
CONTACT PERSON EMAIL	CONTACT PERSON PHONE NUMBER				
carreres.professionals@upf.edu	+34 93 542 24 29				

RECEIVING ORGANISATION										
NAME					DEPARTMENT					
ADI	DRESS			PC	STAL CODE	CITY	COUNTRY			
SIZE				WE	BSITE					
	< than 250 employees		> than 250 employees							
COI	NTACT PERSON NAME ²				CONTACT PERSON POSITION					
COI	NTACT PERSON EMAIL				CONTACT PERSON PHONE NUMBER					
ME	NTOR NAME ³				MENTOR POSITION					
MENTOR EMAIL					MENTOR PHONE NUMBER					

³ The role of the mentor is to provide support, encouragement and information to the trainee on the life and experience relative to the organisation (culture of the organisation, informal codes and conducts, etc.). Normally, the mentor should be a different person than the supervisor.

² A person who can provide administrative information within the framework of Erasmus traineeships.





II. TRAINEESHIP PROGRAM

TRAINEESHIP PROGRAMME AT THE RECEIVING ORGANISATION						
PLANNED PERIO	OD OF THE MOBILITY	FROM		то		
TRAINEESHIP T	ITLE (POSITION)					
NUMBER OF W	ORKING HOURS PER WEEK	TOTAL HOU	IRS			
	GRAMME OF THE TRAINEESHI deliverables and associated timing		w the trainee)			
			y the traineey			
KNOWLEDGE.	SKILLS AND COMPETENCES TO) BE ACQUIRED F	Y THE END OF TH	E TRAINEESHIP		
(Expected learning	g outcomes)					
Davia						
Basic competences						
Generic						
Competences						
Specific						
competences						
MONITORING PLAN Describing how/when the trainee will be monitored during his/her traineeship.						
EVALUATION P						
Describing the assessment criteria to be used to evaluate the trainee.						





TRAINEESHIP IN DIGITAL SKILLS?							
	Yes		No				
Any tr	Any traineeship where trainees receive training and practice in at least one or more of the following activities: digital marketing						

(e.g. social media management, web analytics); digital graphical, mechanical or architectural design; development of apps, software, scripts, or websites; installation, maintenance and management of IT systems and networks; cybersecurity; data analytics, mining and visualisation; programming and training of robots and artificial intelligence applications. Generic customer support, order fulfilment, data entry or office tasks are not considered in this category.

LANGUAGE COMPETENCE ¹													
INDICATE THE MAIN LANGUAGE OF WORK													
	The level of language competence in the working language 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

¹For the Common European Framework of Reference for Languages (CEFR) see <u>here</u>.





BENEFICIARY ORGANISATION (SENDING INSTITUTION)

Choose between A, B or C

A	A The traineeship is embedded in the curriculum and upon satisfactory completion of the traineeship, the institution undertakes to						
•	Award ECTS credits						
.	Give a grade based on Traineeship certificate Final report			Inter	view		
	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		
•	Record the traineeship in the trainee's Europass Mobility Document		Yes		No		
в	The traineeship is voluntary and, upon satisfactory completion of the traineeship, th to	ne insti	tution ι	underta	ikes		
•	Award ECTS credits Yes No Indicate the number of credits						
	Give a grade, Yes No						
	based on 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		
•	Record the traineeship in the trainee's Europass Mobility Document Yes No						
c The traineeship is carried out by a recent graduate and, upon satisfactory completion of the traineeship, the institution undertakes to							
•	Award ECTS credits Yes No Indicate the number of credits						
	Record the traineeship in the trainee's Europass Mobility Document (highly recommended) Yes No						
LI	ABILITY INSURANCE COVERAGE				1		
ls	Is the trainee covered by liability insurance?						

						1	
Insurer	MAPFRE	Insurance number	09	6227000073	30		
ACCIDENT INSURANCE COVERAGE (Covering any eventuality during the student's stay abroad)							
An accident and medical insura	ance coverage has been take	n out by student					
Insurer		Innsurance number	r				
Please specify if it also covers:							
Accidents during travels made	for work purposes			Yes		No	
Accidents on the way to work a	and back from work			Yes		No	





RECEIVING ORGANISATION						
FINANCIAL SUPPORT AND CONTRIBUTION IN KIND						
The trainee will receive a financial support for his/her traineeship from the receiving organisation? Yes N If yes, amount (EURO/month)	١o					
The trainee will receive contribution in kind for his/her traineeship from the receiving organisation? Yes	١o					
If yes, specify						
The Receiving Organisation will provide appropriate support and equipment to the trainee.						

end of the traineeship.

III. RESPONSIBLE PARTS

FOR the at the BENEFICIARY ORGANISSATION (Same as SENDING INSTITUTION) ¹				
NAME POSITION				
Helena Ramalhinho Lourenço Vicerector for Internationalization				
EMAIL				
vr.internacionalitzacio@upf.edu				

¹The responsible person in the sending organisation is responsible for signing the Learning Agreement and recognising the credits and associated learning outcomes on behalf of the responsible academic body as set out in the Learning Agreement.

FOR the RECEIVING ORGANISATION (supervisor) ²					
NAME	POSITION				
EMAIL					

²The responsible person in the receiving organisation (supervisor) is responsible for signing the Learning Agreement, supervising the trainee during the traineeship and signing the Traineeship Certificate.

IV. COMMITTMENT OF THE THREE PARTS

By signing this document, the **trainee**, the **Sending Institution** and the **Receiving Organisation** 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 will communicate to the Sending Institution any problem or changes regarding the traineeship period. The sending institution [and the beneficiary organisation, if different from the sending institution] and the trainee should also commit to what is set out in the Erasmus + grant agreement. The sending institution [and the receiving institution [if the receiving organisation is a higher education institution] undertake[s] to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships.

Trainee

Sending institution

Receiving Organisation

Date

Date

Date