**TRAINEESHIP AGREEMENT**

1. **IDENTIFICATION DETAILS**

**THE TRAINEE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Last name (s)** |  | **First name (s)** |  |
| **Date of birth** |  | **Nationality** |  |
| **Sex [*M/F*]** |  | **Semester, year** | **WS/SS/AY, 2021/2022** |
| **Study cycle** |  | **Subject area, Code** |  |
| **Phone** |  | **E-mail** |  |

**THE SENDING INSTITUTION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Faculty** |  |
| **Erasmus code (if applicable)** |  | **Department** |  |
| **Address, City, Post code** |  | **Country,**  **Country code** |  |
| **Contact person[[1]](#footnote-1)** | | | |
| **Name and surname** |  |  |  |
| **E-mail** |  | **Phone** |  |

**THE RECEIVING ORGANIZATION/ENTERPRISE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Organisation name** | Brno University of Technology, Faculty of Chemistry | **Name Sector[[2]](#footnote-2)** |  |
| **Address, City, Post Code** | Purkyňova 464/118, 612 00 Brno, Czech Republic | **Website** | www.fch.vut.cz/en |
| **Size of enterprise** | 🞏 Small (<50 staff)  ⌧ Medium (51-500 staff)  🞏 Large (> 500 staff) | **Country, Country code** | Czech Republic, CZ |
| **Contact person[[3]](#footnote-3)** | | | |
| Full name and position | Ms Petra Jurčeková – International Officer (Faculty of Chemistry) |  |  |
| E-mail | [jurcekova@fch.vut.cz](mailto:jurcekova@fch.vut.cz) | Phone | +420 541 149 303 |
| **Mentor[[4]](#footnote-4)** | | | |
| Full name and position |  |  |  |
| E-mail |  | Phone |  |

#### **II. PROPOSED MOBILITY PROGRAMME**

|  |
| --- |
| **Planned period of the mobility**:  from [**day/month/year**]: till [**day/month/year**]: **Total days**: |
| **Number of working hours per week:** |
| **Traineeship title:** |
| **Detailed programme of the traineeship period:** |
| **Knowledge**, **skills and competences to be acquired by the trainee at the end of the traineeship:** … |
| **Monitoring and plan:** |
| **Evaluation plan:** |

|  |
| --- |
| **Language competence of the trainee**  The level of language competence[[5]](#footnote-5) in ………………………………[[6]](#footnote-6) that the trainee already has or agrees to acquire by the start of the mobility period is:  A1 🞏 A2 🞏 B1 🞏 B2 🞏 C1 🞏 C2 🞏 |

**THE SENDING INSTITUTION**

The institution undertakes to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships.

**Please fill in only one of the following boxes depending on whether the traineeship is embedded in the curriculum or is a voluntary traineeship.**

|  |
| --- |
| **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 🞏 Interview 🞏   * Record the traineeship in the trainee's Transcript of Records: Yes 🞏 No 🞏 * Record the traineeship in the trainee's Diploma Supplement: Yes 🞏 No 🞏 * Record the traineeship in the trainee's Europass Mobility Document: Yes 🞏 No 🞏 |
| **The traineeship is voluntary** and upon satisfactory completion of the traineeship, the institution undertakes to:   * Award ECTS credits: Yes 🞏 No 🞏  If yes, please indicate the number of ECTS credits: ………………………………………. * Give a grade: Yes 🞏 No 🞏   If yes, please indicate if this will be 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 (except if the trainee is a recent graduate)*: Yes 🞏 No 🞏 * Record the traineeship in the trainee's Europass Mobility Document: Yes 🞏 No 🞏   (*This is recommended if the trainee will be a recent graduate)* |

**THE RECEIVING INSTITUTION**

|  |
| --- |
| • The trainee will receive a financial support for his/her traineeship: Yes 🞏 No ⌧  If yes, amount in EUR/month: ………………………………  • The trainee will receive a contribution in kind for his/her traineeship: Yes 🞏 No ⌧  If yes, please specify: ……………………………………………..  • Is the trainee covered by the accident insurance? Yes 🞏 No ⌧  If not, please specify whether the trainee is covered by an accident insurance 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 🞏  Is the trainee covered by a liability insurance? Yes 🞏 No 🞏  • The receiving organisation/enterprise undertakes to ensure that appropriate equipment and support is available to the trainee.  • Upon completion of the traineeship, the organisation/enterprise undertakes to issue a Traineeship Certificate by **4 weeks** after the traineeship. |

**III. COMMITMENT OF THE THREE PARTIES**

By signing this document, the trainee, the sending institution and the receiving organisation/enterprise confirm that they approve the proposed 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.

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| --- | --- |
| **The trainee** |  |
| Name and surname *(in block letters)*: |  |
|  |  |
| Trainee's signature: | Date: |
|  |  |

|  |  |
| --- | --- |
| **The sending institution** |  |
| Responsible person name[[7]](#footnote-7) *(in block letteres)*: | Function: |
|  |  |
| E-mail: | Phone: |
|  |  |
| Signature: | Date: |

|  |  |
| --- | --- |
| **Brno University of Technology (The receiving institution)** |  |
| Responsible person name[[8]](#footnote-8) | prof. Ing. Michal Veselý, CSc. (Dean) |
|  |  |
|  |  |
| Signature: | Date: |

1. **Contact person** can be a staff from the international office or a staff who is in charge of Erasmus outgoing students. [↑](#footnote-ref-1)
2. The list of top-level **NACE sector codes** is available <http://ec.europa.eu/eurostat/ramon/nomenclatures/index.cfm?TargetUrl=LST_NOM_DTL&StrNom=NACE_REV2&StrLanguageCode=EN>. [↑](#footnote-ref-2)
3. **Contact person**: a person who can provide administrative information within the framework of Erasmus traineeships. [↑](#footnote-ref-3)
4. **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. [↑](#footnote-ref-4)
5. For the Common European Framework of Reference for Languages (**CEFR**) see <http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr> [↑](#footnote-ref-5)
6. Please fill in the language of instruction [↑](#footnote-ref-6)
7. **Responsible person in the sending institution**: this person is responsible for signing the Traineeship Agreement, amending it if needed and recognizing the credits and associated traineeship outcomes on behalf of the responsible academic body as set out in the Traineeship Agreement. [↑](#footnote-ref-7)
8. **Responsible person in the receiving organisation (supervisor)**: this person is responsible for signing the Traineeship Agreement, amending it if needed, supervising the trainee during the traineeship and signing the Traineeship Certificate. [↑](#footnote-ref-8)