**PNRR-TNE International Mobility Programme - Health Education and Advanced Learning Through Collaboration, Opportunities, Networking, and Educational Connections in Balkans and Asian Countries**

**(Health Connect)**

**Project Proposal TNE23-00059 – CUP F91B24000320006**

**Learning Agreement**

**Student Mobility for Studies**

**Student**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Last name |  | | | | |
| First name |  | | | | |
| Gender | ☐ M ☐ F ☐ Not Declared | Nationality | | |  |
| Date of birth |  | | | | |
| E-mail |  | | Phone |  | |
| Student Course | ☐ I cycle ☐ II cycle ☐ III cycle ☐ single-cycle degree program | | | | |
| Faculty/Department |  | | | | |
| Degree program in |  | | | | |
| PhD in |  | | | | |
| Foreign Language Competence Level:  in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ A1 ☐ A2 ☐ B1 ☐ B2 ☐ C1 ☐ C2 ☐ Native speaker ☐  in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ A1 ☐ A2 ☐ B1 ☐ B2 ☐ C1 ☐ C2 ☐ Native speaker ☐ | | | | | |

**Sending institutions**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| City |  | Country |  |
| Department/Faculty |  | | |
| Responsible person[[1]](#footnote-1): | | | |
| Name |  | Position |  |
| E-mail |  | Phone |  |
| Contact for administration[[2]](#footnote-2): | | | |
| Office |  | | |
| Name |  | Position |  |
| E-mail |  | Phone |  |

**Receiving institutions**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| City |  | Country |  |
| Department/Unit |  | | |
| Responsible person[[3]](#footnote-3): | | | |
| Name |  | Position |  |
| E-mail |  | Phone |  |
| Contact for the activity[[4]](#footnote-4): | | | |
| Name |  | Position |  |
| E-mail |  | Phone |  |
| Contact for administration[[5]](#footnote-5): | | | |
| Name |  | Position |  |
| E-mail |  | Phone |  |

**Mobility duration**

|  |  |
| --- | --- |
| First day of activity |  |
| Last day of activity |  |
| Duration (number of months) |  |

**Study programme at the Receiving Institution**

| Component Code | Component Title (as indicated in the course catalogue) | Semester | Number of ECTS Credits |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

(add lines if necessary)

By signing[[6]](#footnote-6) this document, the three parties approve the proposed activity project.

|  |
| --- |
| **The Candidate**  Name:  Signature: Date: |
| **The Sending Institution**  Name of the responsible person:  Stamp and Signature: Date: |
| **The Receiving Institution**  Name of the responsible person8:  Stamp and Signature: Date: |

1. The person who can authorize the mobility activity, normally the Project Responsible (Responsabile Scientifico) or the Head of Department/Faculty. [↑](#footnote-ref-1)
2. The person in the international office or other administration office in charge of international mobility. [↑](#footnote-ref-2)
3. The Head the receiving Department/Faculty. [↑](#footnote-ref-3)
4. The person in the receiving Department/Faculty who will host the mobility activity. [↑](#footnote-ref-4)
5. The person in the international office or other administration office in charge of international mobility in the receiving Institution. [↑](#footnote-ref-5)
6. 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 beneficiary organisation (in the case of mobility with third countries not associated to the programme: the national legislation of the EU Member State or third country associated to the programme). Certificates of attendance can be provided electronically or through any other means accessible to the staff member and the sending institution. [↑](#footnote-ref-6)