



LEARNING AGREEMENT FOR ERASMUS+ TRAINEESHIP

The Trainee

Last name (s)		First name (s)	
Date of birth		Nationality ¹	
Gender [M/F]		Academic year	20...../20.....
Study cycle ²		Subject area, Code ³	
Phone		E-mail	

The Sending Institution

Name	KAROLINSKA INSTITUTET	Faculty	
Erasmus code	S STOCKHO03	Department	
Address	SE-171 77 STOCKHOLM	Country, Country code ⁴	SWEDEN (SE)
Contact person name		Contact person E-mail / phone	

The Receiving Organisation/Enterprise

Name		Department	
Address, website		Country	
Sector ⁵		Size of enterprise ⁶	
Contact person ⁷ name / position		Contact person e-mail / phone	
Mentor name / position		Mentor e-mail / phone	

¹ Country to which the person belongs administratively and that issues the ID card and/or passport.

² 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) - specify the latest study cycle for recent graduates.

³ Please refer to the ISCED 2013 subject field that is closest to the subject of the degree to be awarded to the trainee by the sending institution. For the list of detailed subject fields, see:

<http://www.uis.unesco.org/Education/Pages/international-standard-classification-of-education.aspx>

⁴ Please use ISO 3166-2 country codes available at: <https://www.iso.org/obp/ui/#search>

⁵ For the list of top-level NACE sector codes, see:

http://ec.europa.eu/eurostat/ramon/nomenclatures/index.cfm?TargetUrl=LST_NOM_DTL&StrNom=NACE_REV2&StrLanguageCode=EN

⁶ For instance: 1-50 / 51-500 / more than 500 employees.

⁷ A person who can provide administrative information within the framework of Erasmus traineeships.



Section to be completed BEFORE THE MOBILITY

I. PROPOSED MOBILITY PROGRAMME

Planned period of the mobility	from [month/year] till [month/year]
Number of working hours per week:	
Traineeship title	
Detailed programme of the traineeship period, including tasks/deliverables and associated timing to be carried out by the trainee	
Knowledge, skills (intellectual and practical) and competences to be acquired by the trainee at the end of the traineeship (learning outcomes)	
Monitoring plan	<i>[describing how/when the trainee will be monitored during his / her traineeship by both the sending institution and the receiving organisation / enterprise. Specify the number of supervision hours. Specify if a third party is also involved, such as a higher education institution in the receiving country, and if yes, specify the contact details of the person in charge.]</i>
Evaluation plan	<i>[describing the assessment criteria to be used to evaluate the trainee'ship period.] Examples of assessment criteria: academic skills/expertise, analytical skills, initiative, adaptability, communication skills, teamwork skills, decision-making skills, ICT skills, innovative and creative skills, strategic-organisational skills, foreign language skills]</i>

Language competence of the trainee

The level of language competence⁸ in [workplace language] that the trainee already has or agrees to acquire by the start of the mobility period (for the above-mentioned dates) is:

A1 A2 B1 B2 C1 C2

⁸ For the Common European Framework of Reference for Languages (CEFR) see <http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>



The sending institution

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

➤ **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.
- Record the traineeship in the trainee's Diploma Supplement (or equivalent)
- 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 (or equivalent), except if the trainee is a recent graduate: : Yes No
- Record the traineeship in the trainee's Europass Mobility Document : Yes No
(If the trainee is a recent graduate this is recommended.)

The receiving organisation/enterprise

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 (covering at least damages caused to the trainee at the workplace)? Yes No

If yes, please specify if it also covers:

- accidents during travels made for work purposes: Yes No
- accidents on the way to work and back from work: Yes No

If not, please specify whereas the trainee is covered by an accident insurance provided by the sending institution: Yes No

If yes, please specify if it also 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 (covering damages caused by the trainee at the workplace)? 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 to the trainee [corresponding to the form in the section After the Mobility which needs to be filled in the present document and can additionally be issued independently.]



II. RESPONSIBLE PERSONS

Responsible person⁹ in the sending institution:			
Name		Function	
Phone number		E-mail	

Responsible person¹⁰ in the receiving organisation/enterprise (supervisor):			
Name		Function	
Phone number		E-mail	

III. COMMITMENT OF THE THREE PARTIES

By signing¹¹ 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 mobility period.

The trainee	
Trainee's signature	Date:

The sending institution	
Responsible person's signature	Date:

The receiving organisation/enterprise	
Responsible person's signature	Date:

⁹ The responsible person in the sending organisation is responsible for signing the Learning Agreement and recognising the credits and associated learning outcomes as set out in the Learning Agreement.
¹⁰ The 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.
¹¹ Scanned copies of signatures or digital signatures are recognised. There is no need to circulate papers with original signatures.



Section to be completed DURING THE MOBILITY

EXCEPTIONAL MAJOR CHANGES TO THE ORIGINAL LEARNING AGREEMENT

I. EXCEPTIONAL CHANGES TO THE PROPOSED MOBILITY PROGRAMME

Planned period of the mobility	from [month/year] till [month/year]
Number of working hours per week:	
Traineeship title	
Detailed programme of the traineeship period, including tasks/deliverables and associated timing to be carried out by the trainee	
Knowledge, skills (intellectual and practical) and competences to be acquired by the trainee at the end of the traineeship (learning outcomes)	
Monitoring plan	<i>[describing how/when the trainee will be monitored during his / her traineeship by both the sending institution and the receiving organisation / enterprise. Specify the number of supervision hours. Specify if a third party is also involved, such as a higher education institution in the receiving country, and if yes, specify the contact details of the person in charge.]</i>
Evaluation plan	<i>[describing the assessment criteria to be used to evaluate the trainee'ship period.] Examples of assessment criteria: academic skills/expertise, analytical skills, initiative, adaptability, communication skills, teamwork skills, decision-making skills, ICT skills, innovative and creative skills, strategic-organisational skills, foreign language skills]</i>



II. CHANGES IN THE RESPONSIBLE PERSONS, if any

New responsible person¹² in the sending institution:			
Name		Function	
Phone number		E-mail	

New responsible person¹³ in the receiving organisation/enterprise (supervisor):			
Name		Function	
Phone number		E-mail	

III. COMMITMENT OF THE THREE PARTIES

The trainee, the sending institution and the receiving organisation/enterprise confirm that the proposed amendments to the Learning Agreement are approved.

[Agreement of the proposed amendments by email is accepted. Original or scanned signatures are not mandatory for this specific section.]

The trainee	
Trainee's signature or approval by e-mail	Date:

The sending institution	
Responsible person's signature or approval by e-mail	Date:

The receiving organisation/enterprise	
Responsible person's signature or approval by e-mail	Date:

¹² The responsible person in the sending organisation is responsible for signing the Learning Agreement and recognising the credits and associated learning outcomes as set out in the Learning Agreement.

¹³ The 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.

Section to be completed AFTER THE MOBILITY

TRAINEESHIP CERTIFICATE

[This Traineeship Certificate must be issued together with the sections before and during mobility and it can additionally be issued independently].

Name of the trainee:	
Name of the receiving organisation/enterprise	
Sector of the receiving organisation/enterprise:	
Address of the receiving organisation/enterprise <i>[street, city, country, phone, e-mail address, website]</i>	
Start¹⁴ and end¹⁵ of the traineeship	from <i>[day/month/year]</i> till <i>[day/month/year]</i>
Traineeship title:	
Detailed programme of the traineeship period including tasks carried out by the trainee	
Knowledge, skills (intellectual and practical) and competences acquired (learning outcomes achieved)	
Evaluation of the trainee¹⁶	
Date	
Name, signature and stamp of the responsible person at the receiving organisation/enterprise	

¹⁴ First day the trainee has been present at the enterprise to carry out his/her traineeship.

¹⁵ The end of the traineeship period is the last day the trainee has been present at the receiving enterprise to carry out his/her traineeship.

¹⁶ According to the agreed assessment criteria, such as: academic skills/expertise, analytical skills, initiative, adaptability, communication skills, teamwork skills, decision-making skills, ICT skills, innovative and creative skills, strategic-organisational skills, foreign language skills, ...