**General information**

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| --- | --- | --- | --- | --- | --- |
| **Staff**  **Member** | **Last name(s)** | **First name(s)** | **Date of birth** | **Nationality** | **Gender** |
|  |  |  |  |  |
| **ESI (or ID)** | | **Seniority** | **Faculty/Department** | |
|  |  |  |  | |
| **Sending Institution:**  ETARRAGO01 | **Name** | **Faculty/Department** | **Country** | **Administrative contact person name; email; phone** | |
| **Universitat Rovira i Virgili** | **International Center** | **Spain** | **Núria Golobardes**  [**m**obility@urv.cat](mailto:mobility@urv.cat)  **+34 977256595** | |
| **Receiving Institution**  *Erasmus code,*  *if any:* | **Name** | **Faculty/Department** | **Country** | **Administrative contact person name; email; phone** | |
|  |  |  |  | |
| The level of language competence in \_\_\_\_\_\_\_\_ [indicate here the main language of instruction] that the sstaff already has or agrees to acquire by the start of the study period is:  *A1*  *A2*  *B1*  *B2*  *C1*  *C2*  *Native speaker* | | | | | |

**Mobility type and duration**

|  |  |
| --- | --- |
| **Mobility type** | **Estimated duration (to be confirmed by the Receiving Institution)** |
| * Physical mobility * *Virtual mobility* * *Blended (Combine physical & virtual mobility)* | Planned period of the **physical** mobility:   * from [day/month/year] ……………. to [day/month/year] …………… * total duration ………… (days) |

**PROPOSED MOBILITY PROGRAMME**

Language of training: ………………………………………

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| **Overall objectives of the mobility:** |
| **Training activity to develop pedagogical and/or curriculum design skills: Yes ☐ No ☐** |
| **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):** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Commitment of the three parties**  ***Any Mobility type*** | | | | | |
| By signing**4** 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. | | | | | |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Staff Member |  |  |  |  |  |
| Responsible person at theSending Institution |  |  |  |  |  |
| Responsible person at theReceiving Institution |  |  |  |  |  |