

**ERASMUS + LEARNING AGREEMENT FOR VET MOBILITY****I. DETAILS ON THE PARTICIPANT**

Name of the participant:

Field of vocational education:

Sending institution (name, address):

Contact person (name, function, e-mail, tel):

**II. DETAILS OF THE PROPOSED TRAINING PROGRAMME ABROAD**

Receiving organisation (name address):

Contact Person (name, function, e-mail, tel):

Planned dates of start and end of the placement period:

**Knowledge, skills and competence to be acquired:**

**Detailed programme of the training period:**

**Tasks of the trainee:**

**Monitoring and Mentoring of the participant:**

**Evaluation and Validation of the training placement:**

### III. COMMITMENT OF THE PARTIES INVOLVED

**By signing this document, the participant, the sending institution and the receiving organisation (and the intermediary organisation if applicable)\* confirm that they will abide by the principles of the Quality Commitment for VET Mobility projects attached below.**

*\*please add a box below for the signature of the intermediary organisation – if applicable*

#### THE PARTICIPANT

Participant's signature

..... Date:  
.....

#### THE SENDING INSTITUTION

We confirm that this proposed training programme agreement is approved.

On completion of the training programme the institution will issue .....[...a Europass Mobility, *other form of validation/recognition...*] to the participant

Coordinator's signature

..... Date: .....

#### THE RECEIVING ORGANISATION

We confirm that this proposed training programme is approved.

On completion of the training programme the organisation will issue [...a *Certificate* ...] to the participant

Coordinator's signature

..... Date: .....