

**Erasmus+ Learning Agreement
Student Mobility for Traineeships¹**

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TRAINEE						
Last name(s)	First name(s)	Date of birth	Nationality ²	Gender [Male/Female/Undefined]	Registration Number / Matrikelnummer	E-mail
Field of education ³				Semesters already studied	Level of education (EQF level) ⁴	
<input type="checkbox"/> 0213 / Fine Art <input type="checkbox"/> 0222 / Conservation Restoration <input type="checkbox"/> 0114 BA Education in Arts <input type="checkbox"/> 0114 MA Education in Arts		<input type="checkbox"/> 0212 Arts / Scenography <input type="checkbox"/> 0288 Arts / MA Critical Studie <input type="checkbox"/> 0731 BA Architecture <input type="checkbox"/> 0731 MA Architecture <input type="checkbox"/> 9999 doctoral studies			<input type="checkbox"/> Diploma Studies or BA <input type="checkbox"/> MA <input type="checkbox"/> Doctoral	
BENEFICIARY ORGANISATION⁵						
Name	Department	Erasmus code	Address	Country	Contact person name ⁶ ; email	
Academy of Fine Arts Vienna	International Office	AWIEN06	Schillerplatz 3, 1010 Vienna	Austria	Stefanie Stern s.stern@akbild.ac.at international@akbild.ac.at	
RECEIVING ORGANISATION						
Name/ Department	Address:		Country / ZIP Code	Size	Contact person ⁷ name; position;	
				<input type="checkbox"/> ≤250 employees <input type="checkbox"/> > 250 employees		
E-mail:	Phone number: (mandatory)		Website: (mandatory)		Mentor ⁸ name;	

Before the mobility

Table A - traineeship programme at the receiving organisation

Planned period of the physical component: **from** **to**

Traineeship title:

Number of working hours per week:
(mind 30h)

Detailed programme of the traineeship:

Traineeship in digital skills⁹: Yes No

Knowledge, skills and competences to be acquired by the end of the traineeship (expected learning outcomes):

Monitoring plan:

[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]

continual assessment

other:

3rd party involved: **Yes** **No**

If yes – Contact details: Name: E-mail:

Evaluation plan:

[describing the assessment criteria to be used to evaluate the trainee ship period.]

- academic skills / expertise
- technical skills
- analytical skills
- initiative
- adaptability
- communication skills
- teamwork skills

- decision-making skills
- ICT skills
- innovative and creative skills
- foreign language skills
- strategic-organisational skills
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The level of **language competence**¹⁰ in _____ [indicate here the main language of work] that the trainee already has or agrees to acquire by the start of the mobility period is: A1 A2 B1 B2 C1 C2 Native speaker

Table B - Sending Institution

1. The traineeship is **voluntary** and, upon satisfactory completion of the traineeship, the institution undertakes to:

Award ECTS credits (or equivalent): Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please indicate the number of credits:
Give a grade: Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please indicate if this will be based on: Traineeship certificate <input type="checkbox"/> Final report <input type="checkbox"/> Interview <input type="checkbox"/>
Record the traineeship in the trainee's Transcript of Records: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Record the traineeship in the trainee's Diploma Supplement (or equivalent).	
Record the traineeship in the trainee's Europass Mobility Document: Yes <input type="checkbox"/> No <input type="checkbox"/>	

ACCIDENT INSURANCE FOR THE TRAINEE

<p>The beneficiary organisation* will provide an accident insurance to the trainee (if not provided by the Receiving Organisation): Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>The ÖH insurance covers:</p> <ul style="list-style-type: none"> - accidents during travels made for work purposes: Yes <input type="checkbox"/> No <input type="checkbox"/> - accidents on the way to work and back from work: Yes <input type="checkbox"/> No <input type="checkbox"/> - a liability insurance to the trainee: Yes <input type="checkbox"/> No <input type="checkbox"/> <p>* The ÖH provides accident and liability insurance, valid for internships in other EU countries. The exact terms and conditions can be found in the attached insurance policy. Please pay particular attention to points 2.2 and 2.3 of the policy.</p>
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The trainee is responsible for enrolling at the academy and paying the student union fee on time. In the event of de-registration, the entitlement to funding and insurance cover lapses. **We highly recommend that you take out additional travel and liability insurance.** The ÖH insurance does NOT include health insurance; insurance coverage abroad must be clarified with Austria's respective health insurance company.

The trainee is aware of the insurance policy's regulations as mentioned above.

Yes No

Table C - Receiving Organisation

The Receiving Organisation will provide financial support to the trainee for the traineeship: Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, amount (EUR/month):
The Receiving Organisation will provide a contribution in kind to the trainee for the traineeship: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please specify:		
The Receiving Organisation will provide an accident insurance to the trainee (if not provided by the beneficiary organisation): Yes <input type="checkbox"/> No <input type="checkbox"/>	The accident insurance covers: - accidents during travels made for work purposes: Yes <input type="checkbox"/> No <input type="checkbox"/> - accidents on the way to work and back from work: Yes <input type="checkbox"/> No <input type="checkbox"/>	
The Receiving Organisation will provide a liability insurance to the trainee (if not provided by the beneficiary organisation): Yes <input type="checkbox"/> No <input type="checkbox"/>		
The Receiving Organisation will provide appropriate support and equipment to the trainee.		
Upon completion of the traineeship, the Receiving Organisation undertakes to issue a traineeship certificate within 5 weeks after the end of the traineeship.		

By signing this document, the trainee, the beneficiary organisation, the receiving organisation [and the sending institution, if different from the beneficiary organisation] confirm that they approve the learning agreement and that they will comply with all the arrangements agreed by all parties. The trainee and receiving organisation will communicate to the sending institution [and beneficiary organisation, if different from the sending institution] any problem or changes regarding the traineeship period. The sending institution [and the beneficiary organisation, if different from the sending institution] and the trainee should also commit to what is set out in the Erasmus+ grant agreement. The sending institution [and the receiving institution [if the receiving organisation is a higher education institution] undertake[s] to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships.

Commitment	Name	Email	Position	Date & Signature
Trainee				
Responsible person ¹¹ at the beneficiary organisation	Mag. Stefanie Stern, BA	s.stern@akbild.ac.at	International Coordinator	
Supervisor ¹² at the receiving organisation				

During the Mobility

Table A2 - Exceptional Changes to the Traineeship Programme at the Receiving Organisation

(to be approved by e-mail or signature by the student, the responsible person in the sending institution and the responsible person in the receiving organisation)

Planned period of the mobility: from [day (optional)/month/year] till [day (optional)/month/year]

Traineeship title: ...

Number of working hours per week: ...

Detailed programme of the traineeship period:

Knowledge, skills and competences to be acquired by the end of the traineeship (expected learning outcomes):

Monitoring plan:

Evaluation plan:

After the Mobility

Table D - Traineeship Certificate by the Receiving Organisation

Name of the trainee:
Name of the Receiving Organisation:
Sector of the Receiving Organisation:
Address of the Receiving Organisation [street, city, country, e-mail address], website:
Start date and end date of the complete traineeship (incl. virtual component, if applicable): from [day/month/year] to [day/m
Start date and end date of physical component: from [day/month/year] to [day/month/year]
Traineeship title:
Detailed programme of the traineeship period including tasks carried out by the trainee (including the virtual component, if applicable):
Knowledge, skills (intellectual and practical) and competences acquired (achieved learning outcomes):
Evaluation of the trainee:
Date:
Name and signature of the Supervisor at the Receiving Organisation:

¹ In case the mobility combines studies and traineeship, the mobility agreement for studies template should be used and adjusted to fit both activity types.

² Country to which the person belongs administratively and that issues the ID card and/or passport.

³ **Field of education:** The [ISCED-F 2013 search tool](http://ec.europa.eu/education/tools/isced-f_en.htm) available at http://ec.europa.eu/education/tools/isced-f_en.htm should be used to find the ISCED 2013

detailed field of education and training that is closest to the subject of the degree to be awarded to the trainee by the sending institution.

⁴ **Level of education:** 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). EQF level codes 5 to 8 are equivalent to the ISCED levels 5 to 8.

⁵ In the case of outgoing mobility, the beneficiary organisation is the sending institution.

⁶ **Contact person at the sending institution:** a person who provides a link for administrative information and who, depending on the structure of the higher education institution, may be the departmental coordinator or will work at the international relations office or equivalent body within the institution.

⁷ **Contact person at the receiving organisation:** a person who can provide administrative information within the framework of Erasmus+ traineeships.

⁸ **Mentor:** the role of the mentor is to provide support, encouragement and information to the trainee on the life and experience relative to the organisation (culture of the organisation, informal codes and conducts, etc.). Normally, the mentor should be a different person than the supervisor.

⁹ **Traineeship in digital skills:** any traineeship where trainees receive training and practice in at least one or more of the following activities: digital marketing (e.g. social media management, web analytics); digital graphical, mechanical or architectural design; development of apps, software, scripts, or websites; installation, maintenance and management of IT systems and networks; cybersecurity; data analytics, mining and visualisation; programming and training of robots and artificial intelligence applications. Generic customer support, order fulfilment, data entry or office tasks are not considered in this category.

¹⁰ **Level of language competence:** a description of the European Language Levels (CEFR) is available at:

<https://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>

¹¹ **Responsible person at the beneficiary organisation:** this person is responsible for signing the learning agreement, amending it if needed and if the beneficiary organisation is the sending institution, is responsible for recognising the credits and associated learning outcomes on behalf of the responsible academic body as set out in the learning agreement. The name and email of the responsible person must be filled in only in case it differs from that of the contact person mentioned at the top of the document.

¹² **Supervisor at the receiving organisation:** this person is responsible for signing the learning agreement, amending it if needed, supervising the trainee during the traineeship and signing the Traineeship Certificate. The name and email of the supervisor must be filled in only in case it differs from that of the contact person mentioned at the top of the document.