|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **PhD student** | **Last name(s)** | **First name(s)** | **Date of birth** | **Nationality** | **Sex [M/F]** | **Study cycle** | **Field of education** |
|  |  |  |  |  |  | Ph.D. Program in Information Engineering |
| **Sending Institution** | **Name** | **Department** | **Address** | **Country** | **Contact person name**; **email; phone** |
| Università di Pisa | Information Engineering | Via G. Caruso 16 - 56122 - Pisa | Italy | Luca Sanguinetti ; luca.sanguinetti@unipi.it; +390502217599 |
| **Receiving** **Organisation/Enterprise** | **Name** | **Department** | **Address; website** | **Country** | **Size** | **Contact person name; position; e-mail; phone** | **Mentor name; position;****e-mail; phone** |
|  |  |  |  | [ ]  **< 250 employees**[ ]  **> 250 employees** |  |  |
| **Before the mobility** |
|  | ***Table A – Visiting Period Programme at the Receiving Organisation/Enterprise*** |
| **Planned period of the mobility: from /2023 to /2023** |
| **Title:** Research activities on …… |
| **Detailed programme:** During the visiting period, the PhD student …… |
| **Knowledge**, **skills and competences to be acquired by the end of the visiting period (expected Learning Outcomes):**During the visiting period, the PhD student will acquire knowledge, skills, and competences about techniques and tools for ….. |
| **Monitoring plan:**The activities will be monitored through ……… |
| **Evaluation plan:**It is expected that these activities will result in ……… |
|  |  |  |  |  |  |  |  |  |
| The level of **language competence** in English [*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* [ ]  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Table B - Sending Institution*** *Please use only one of the following three boxes:*1. The visiting period is **embedded in the curriculum** and upon satisfactory completion of the period, the institution undertakes to:

|  |  |
| --- | --- |
| Award …….. .…ECTS credits (or equivalent) | Give a grade based on: Certificate [ ]  Final report [ ]  Interview [ ]    |
| Record the visiting period in the PhD student's Diploma Supplement (or equivalent).  |

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

|  |  |
| --- | --- |
| Award ECTS credits (or equivalent): Yes [ ]  No [x]   |  If yes, please indicate the number of credits: …. |
| Give a grade: Yes [ ]  No [x]   | If yes, please indicate if this will be based on: Certificate [ ]  Final report [ ]  Interview [ ]    |
| Record the visiting period in the PhD student's Transcript of Records: Yes [ ]  No [x]   |
| Record the visiting period in the PhD student's Diploma Supplement (or equivalent). |

**Accident insurance for the trainee**

|  |  |
| --- | --- |
| The Sending Institution will provide an accident insurance to the PhD student (if not provided by the Receiving Organisation/Enterprise): Yes [x]  No [ ]   | The accident insurance covers: - accidents during travels made for work purposes: Yes [x]  No [ ]  - accidents on the way to work and back from work: Yes [x]  No [ ]  |
| The Sending Institution will provide a liability insurance to the PhD student (if not provided by the Receiving Organisation/Enterprise): Yes [x]  No [ ]  |

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| ***Table C - Receiving Organisation/Enterprise***

|  |  |
| --- | --- |
| The Receiving Organisation will provide financial support to the PhD student for the visiting period: Yes [ ]  No [ ]   | If yes, amount (EUR/month): ……….. |
| The Receiving Organisation will provide a contribution in kind to the PhD student for the visiting period: Yes [ ]  No [ ]  If yes, please specify: …. |
| The Receiving Organisation will provide an accident insurance to the PhD student (if not provided by the Sending Institution): Yes [ ]  No [ ]   | The accident insurance covers: - accidents during travels made for work purposes: Yes [ ]  No [ ]  - accidents on the way to work and back from work: Yes [ ]  No [ ]  |
| The Receiving Organisation will provide a liability insurance to the PhD student (if not provided by the Sending Institution): Yes [ ]  No [x]  |
| The Receiving Organisation will provide appropriate support and equipment to the PhD student.  |
| Upon completion of the visiting period, the Organisation undertakes to issue a Certificate within 5 weeks after the end of the visiting period. |

 |
| By signing this document, the PhD student, the Sending Institution and the Receiving Organisation/Enterprise confirm that they approve the Learning Agreement and that they will comply with all the arrangements agreed by all parties. The PhD student and Receiving Organisation/Enterprise will communicate to the Sending Institution any problem or changes regarding the visiting period.  |
| **Commitment** | **Name** | **Email** | **Position** | **Date** | **Signature** |
| Trainee |  |  | *Trainee* |   |  |
| Responsible person at the Sending Institution | Luca Sanguinetti | luca.sanguinetti@unipi.it |  Responsible at the Sending Institution |   |  |
| Supervisor at the Receiving Organisation/Enterprise |  |  |  Supervisor at the Receiving Organization/Enterprise |   |  |

**After the Mobility**

|  |
| --- |
| ***Table D - Certificate by the Receiving Organisation/Enterprise*** |
| **Name of the PhD student: …………** |
| **Name of the Receiving Organisation/Enterprise: …………** |
| **Sector of the Receiving Organisation/Enterprise:** |
| **Address of the Receiving Organisation/Enterprise** [street, city, country, phone, e-mail address]**, website:** |
| **Start date and end date of visiting period: from [day/month/year] ……….……………. to [day/month/year] ……………..……..** |
| **Title:**  |
| **Detailed programme of the visiting period including tasks carried out by the PhD student:**  |
| **Knowledge, skills (intellectual and practical) and competences acquired (achieved Learning Outcomes):**  |
| **Evaluation of the PhD student:**  |
| **Number of ECTS credits awarded:** |
| **Date:** |
| **Name and signature of the Supervisor at the Receiving Organisation/Enterprise:**  |
| **Number of ECTS credits recognised:** |
| **Date:** |
| **Name and signature of the Responsible person at the Sending Institution:**  |