**Mobility Agreement - Staff Mobility for Training**

**The staff member**

|  |  |
| --- | --- |
| Name: |  |
| E-mail: |  |

**The sending institution**

Johannes Gutenberg-University Mainz

DMAINZ01 NACE P85.4

55099 Mainz

Contact person: Benjamin Grosch (ERASMUS Coordinator)

staff-erasmus@international.uni-mainz.de

**The receiving institution/enterprise**

|  |  |
| --- | --- |
| Name: |  |
| ERASMUS-Code (if applicable and known): |  |
| Adress: |  |
| Name and position of contact person: |  |
| E-mail of contact person: |  |
| Size of enterprise: | 🞏 1–50 staff 🞏 51–250 staff 🞏 >250 staff |
| NACE (if known): |  |

**Section to be completed before the mobility**

1. **Proposed mobility programme**

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| --- | --- |
| Planned start and end date of the training activity: from \_ \_ \_ \_ \_ \_ to \_ \_ \_ \_ \_ \_  Number of work days planned: |  |

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| **Overall objectives of the mobility:** |

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| **Added value of the mobility (both for the institutions involved and for the staff member):** |

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| **Activities to be carried out:** |

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| **Expected outcomes and impact:** |

**II. COMMITMENT OF THE THREE PARTIES**

By signing[[1]](#endnote-1) 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 receiving institution/enterprise will communicate to the sending institution any problems or changes regarding the proposed mobility programme or mobility period.

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| **The staff member**  Name:  Date, signature: |

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| **The receiving institution / enterprise**  Name of the responsible person:  Date, signature:  Stamp: |

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| **The sending institution**  Name of the responsible person: Benjamin Grosch  Date, signature:  Stamp: |

1. Circulating papers with original signatures is not compulsory. Scanned copies of signatures or digital signatures will be accepted.

   Please send the completed and duely signed document to staff-[erasmus@international.uni-mainz.de](mailto:erasmus@international.uni-mainz.de). Thank you! [↑](#endnote-ref-1)