



**Higher Education
Learning Agreement form
STUDENT'S NAME**

LEARNING AGREEMENT – Student Mobility for TRAINEESHIPS

The Student

Last name (s)		First name (s)	
Date of birth dd/mm/yyyy		Nationality ¹	
Sex [M/F]		Academic year	2017/2018
Study cycle ²		Field of education (Subject area, Code) ³	
Phone		E-mail	

Komentarz [11]: wypełnia student

The Sending Institution

Name:	University of Life Sciences in Lublin	Faculty	
Erasmus code (if applicable)	PL LUBLIN04	Major field of study (kierunek)	
Address	Akademicka 13 20-950 Lublin	Country, Country code ⁴	POLAND, PL
Contact person ⁵ name (Faculty/Departmental Coordinator)		e-mail phone	
Institutional ⁵ Coordinator	Kinga SŁOMIŃSKA, MSc (Ms) International Exchange Office Akademicka 13, 20-950 Lublin	e-mail phone	kinka.slominska@up.lublin.pl +48/ 81/ 445 65 80
Contact person at the office	Anna DĘBSKA, MSc (Mrs) as above	e-mail phone	anna.debska@up.lublin.pl +48/ 81/ 445 65 80

Komentarz [12]:
patrz wskazówki w przypisie na końcu strony

Komentarz [13]:
informacje dostępne na stronie
<http://erasmus.up.lublin.pl/dokumenty>
np. 0841: Veterinary

Komentarz [14]: wpisać nazwę
wydziału, dostępne na stronie:
<http://erasmus.up.lublin.pl/dokumenty>

Komentarz [15]: wpisać kierunek,
dostępne na stronie:
<http://erasmus.up.lublin.pl/dokumenty>

Komentarz [16]: prodziekan
właściwy dla danego kierunku i
jego dane

The Receiving Organization/Enterprise

Name of Organization			
Erasmus code ⁶ (if applicable)	Faculty (if applicable)		
Sector ⁷	A AGRICULTURE, FORESTRY AND FISHING	Department (if applicable)	
Address (street, no, postal code, city)		Country, Country code	
Website		Size of enterprise	<input type="checkbox"/> < 250 employees <input type="checkbox"/> > 250 employees
Contact person ⁸ name/position		Contact person e-mail/ phone	
Mentor ⁹ name/ position		Mentor e-mail/ phone	

Komentarz [17]: wypełnia student
w porozumieniu z uczelnią
przyjmującą (szczegóły w
przypisach)

Komentarz [18]: wybrać z listy
dostępnej na stronie - w przypisie
na końcu strony
dla kierunków UP w Lublinie :
A AGRICULTURE, FORESTRY AND
FISHING

¹ **Nationality:** country to which the person belongs administratively and that issues the ID card and/or passport.

² **Study cycle:** 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).

³ **Field of education:** the [ISCED-F 2013 search](http://ec.europa.eu/education/tools/isced-f_en.htm) tool 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 student by the Sending Institution.

⁴ **Country code:** Please use ISO 3166-2 country codes available at: <https://www.iso.org/obp/ui/#search>

⁵ **Contact person/Institutional coordinator:** 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.

⁶ **Erasmus code:** unique identifier that every higher education institution that has been awarded with the Erasmus Charter of Higher Education (ECHE) receives. It is only applicable to higher education institutions located in Programme Countries.

⁷ The list of top-level **NACE sector codes** is available at:

http://ec.europa.eu/eurostat/ramon/nomenclatures/index.cfm?TargetUrl=LST_NOM_DTL&StrNom=NACE_REV2&StrLanguageCode=EN

⁸ **Contact person at the Receiving Organisation:** a person who can provide administrative information within the framework of Erasmus+ traineeships

⁹ **Mentor:** the role of the mentor is to provide support, encouragement and information to the trainee on the life and experience relative to the enterprise

BEFORE THE MOBILITY

Table A - TRAINEESHIP Programme at the Receiving Organisation/Enterprise

Planned period of the mobility: from [dd/month/year] XX/XX/XXXX till [dd/month/year] XX/XX/XXXX	Komentarz [19]: wypełnia student w porozumieniu z osobą kontaktową i opiekunem praktyk w organizacji przyjmującej za granicą
Number of working hours per week: XXX	
Traineeship title: XXX	
Detailed programme of the traineeship: Tasks of the trainee: TO FILL OUT	
Knowledge, skills and competences to be acquired by the trainee at the end of the traineeship (expected Learning Outcomes): TO FILL OUT	Komentarz [110]: BARDZO WAŻNE !! Należy wpisać daty dzienne pobytu ustalone z organizacją przyjmującą. Według tych dat zostanie naliczone stypendium, a student będzie zobowiązany dostarczyć zaświadczenie o odbytej mobilności.

Monitoring Plan:	Komentarz [111]: praca w pełnym wymiarze godzin od 35 do 40 godzin tygodniowo
<p><u>Monitoring activities of the Sending Institution</u></p> <p><input type="checkbox"/> every 2 weeks on Monday: an Email from the trainee with a short report (an electronic version of the monitoring form will be sent before the departure of the trainee),</p> <p><input type="checkbox"/> Optionally (choose relete): <input type="checkbox"/> at the end of the first month: monitoring visit of Home University representatives <input checked="" type="checkbox"/> X on the request the progress report will be sent out the Sending Institution</p> <p><input type="checkbox"/> Other - Sending Institution decides:</p>	
<p><u>Monitoring activities of the tutor from the Receiving Organisation/Enterprise</u></p> <p><input type="checkbox"/> job shadowing, executing tasks given by the tutor.</p> <p><input type="checkbox"/> everyday monitoring of the trainee work and verbal feedback at the end of each day</p> <p><input type="checkbox"/> after the first, second and third month of the placement: Email from the tutor with the short report (an electronic version of the monitoring form will be sent to tutor before the trainee's arrival)</p> <p><input type="checkbox"/> weekly plan: - <u>Mondays</u>: Weekly plan will be provided to the trainee. - <u>Wednesdays</u>: Check points - what has been done, evaluate the on-going work. - <u>Fridays</u>: Evaluation of the week work done, encounter the problems and provide solutions. Signing the weekly report prepared by trainee. - weekly study meeting</p> <p><input type="checkbox"/> Other - Receiving Organisation/Enterprise decides:</p>	Komentarz [112]: podać tytuł praktyki Komentarz [113]: należy uzgodnić i organizacją przyjmującą; zadania jakie będzie wykonywać praktykant Komentarz [114]: należy podać jakie: a) wiedze , b) umiejętności , w podziale na: - akademickie, - techniczne, - językowe, - interpersonalne, - personalne i/ lub - inne) c) kompetencje nabędzie praktykant na zakończenie praktyki poprzez wykonywane zadania

Evaluation Plan :	Komentarz [115]: UWAGA: proszę nie zmieniać tego co zaznaczone
<p><u>Evaluation activities by the tutor from the Receiving Organisation/Enterprise:</u></p> <ul style="list-style-type: none"> preparing the Confirmation of Stay and Transcript of Work at the end of the traineeship including an evaluation of the trainee's performance of essential tasks preparing the Traineeship Certificate confirming that all agreed tasks were done <p><input type="checkbox"/> Other – Receiving Organisation/Enterprise decides:</p>	
<p><u>Evaluation activities of the Sending Institution:</u></p> <ul style="list-style-type: none"> preparing a final evaluation on the basis of all monitoring and evaluation activities and the Transcript of Work/Traineeship Certificate recognition of the traineeship by the person responsible for traineeships (e.g. deputy dean) 	Komentarz [116]: należy zaznaczyć w uzgodnieniu z instytucją przyjmującą

<p><u>Language competence of the student</u></p> <p>The level of language competence¹⁰ in XXX [<i>language of instruction</i>] that the trainee already has or agrees to acquire by the start of the mobility period: <input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> Native speaker <input type="checkbox"/></p>	Komentarz [117]: należy zaznaczyć w uzgodnieniu z instytucją przyjmującą
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¹⁰**Level of language competence:** For the Common European Framework of Reference for Languages (CEFR) see <http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>

Komentarz [118]: wypełnia student w porozumieniu z osobą kontaktową i opiekunem praktyk w organizacji przyjmującej za granicą

Komentarz [119]:
BARDZO WAŻNE !!
Należy wpisać daty dzienne pobytu ustalone z organizacją przyjmującą. Według tych dat zostanie naliczone stypendium, a student będzie zobowiązany dostarczyć zaświadczenie o odbytej mobilności.

Komentarz [120]: zaznaczyć w uzgodnieniu z instytucją przyjmującą

Komentarz [121]:
należy uzgodnić i organizacją przyjmującą; zadania jakie będzie wykonywać praktykant

Komentarz [122]:
należy podać jakie:
 a) **wiedze**,
 b) **umiejętności**, w podziale na:
 - akademickie,
 - techniczne,
 - językowe,
 - interpersonalne,
 - personalne
 i/ lub
 - **inne**)
 c) **kompetencje**
 nabędzie praktykant na zakończenie praktyki poprzez wykonywane zadania

Komentarz [123]:
UWAGA:
proszę nie zmieniać tego co zaznaczone

Komentarz [124]:
należy zaznaczyć w uzgodnieniu z instytucją przyjmującą

Komentarz [125]:
należy zaznaczyć w uzgodnieniu z instytucją przyjmującą

Komentarz [126]:
BARDZO WAŻNE
należy wziąć po uwagę wymagania językowe instytucji przyjmującej.

Komentarz [127]:
wpisać język środowiska pracy (praktyki)

Komentarz [128]: zaznaczyć właściwy poziom - zgodnie z zaświadczeniem od lektora lub certyfikatem zewnętrznym dostarczonym do BWM



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Table B – Sending Institution

Please use only one of the following three boxes:¹¹

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

Award ECTS credits (or equivalent) ¹²
Give a grade based on: Traineeship Certificate <input type="checkbox"/> Transcript of Work <input type="checkbox"/> Final report <input type="checkbox"/> Interview <input type="checkbox"/>
Record the traineeship in the trainee's Transcript of Records and Diploma Supplement (or equivalent).
Record the traineeship in the trainee's Europass Mobility Document: Yes <input type="checkbox"/> No <input type="checkbox"/>

2. 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 grade will be based on: Traineeship Certificate <input type="checkbox"/> Transcript of Work <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"/>

3. The traineeship is carried out by a **recent graduate** 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"/>

Accident insurance for the trainee

The Sending Institution will provide an accident insurance (if not provided by the Receiving Organisation/Enterprise): Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	The accident insurance covers: - accidents during travels made for work purposes: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> - accidents on the way to work and back from work: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
The student is responsible to provide an accident insurance by itself.	
The Sending Institution will provide a liability insurance to the trainee (if not provided by the Receiving Organisation/Enterprise): Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
The student is responsible to provide an accident and liability insurance by itself.	

Komentarz [121]:

WAŻNE !!

Wypełnij tylko jedną z trzech poniżej tabel, w zależności czy praktyka realizowana za granicą jest:

1) praktyką obowiązkową

- wpisać liczbę ECTS zgodnie z programem studiów
- należy zaznaczyć:
 - a) Traineeship Certificate - **YES**
 - b) Transcript of Work - **YES**

2) praktyką dodatkową

- należy zaznaczyć:
 - a) ECTS - **NO**
 - b) Traineeship Certificate - **YES**
 - c) Transcript of Work - **YES**
 - d) Transcript of Records - **YES**
 - e) Diploma Supplement - **YES**

3) stażem absolwenckim

- należy zaznaczyć:
 - a) ECTS - **NO**
 - b) Give a grade - **YES**

Komentarz [u22]:

WAŻNE !!

UP w Lublinie nie zapewnia ubezpieczenia wypadkowego i odpowiedzialności cywilnej

Proszę nie zmieniać już zaznaczonych pól!

Table C – Receiving Organisation/Enterprise

The Receiving Organisation/Enterprise 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/Enterprise 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/Enterprise will provide an accident insurance to the trainee (if not provided by the Sending Institution): Yes <input type="checkbox"/> No <input type="checkbox"/> The accident insurance covers: - accidents during travels made for work purpose: 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/Enterprise will provide a liability insurance to the trainee (if not provided by the Sending Institution): Yes <input type="checkbox"/> No <input type="checkbox"/>	
The Receiving Organisation/Enterprise will provide appropriate support and equipment to the trainee.	
Upon completion of the traineeship, the Organisation/Enterprise undertakes to issue the documents: Traineeship Certificate and Confirmation of Stay and transcript of Work within 5 weeks after the end of the traineeship.	

Komentarz [u23]:

Należy zaznaczyć właściwe pola w uzgodnieniu z instytucją zagraniczną.

Jeżeli instytucja zagraniczna zapewnia ubezpieczenie wypadkowe – proszę dostarczyć (przesłać) polisę w języku angielskim

¹¹ There are three different provisions for traineeships:

1. Traineeships embedded in the curriculum (counting towards the degree)
2. Voluntary traineeships (not obligatory for the degree)
3. Traineeships for recent graduates

¹² ECTS credits equivalent : in countries where the ECTS system is not in place, in particular for institutions located in Partner Countries not participating in Bologna process, ECTS needs to be replaced in all tables by the name of the equivalent system that is used and the web link to an explanation to the system should be added.



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COMMITMENT OF THE THREE PARTIES

By signing¹³ this document, the trainee, 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 trainee and Receiving Organisation/Enterprise will communicate to the Sending Institution any problem or changes regarding the traineeship period. The Sending Institution and the trainee should also commit to what is set out in the Erasmus+ grant agreement. The institution undertakes to respect all the principles of the Erasmus Charter for Higher Education relating to traineeships (or the principles agreed in the partnership agreement for institutions located in Partner Countries).

RESPONSIBLE PERSONS

The student

Student's signature Date:

The Sending Institution: PL LUBLIN04

The Responsible person at the Sending Institution¹⁴

Faculty Coordinator	Institutional Coordinator
XXX – wpisać dane właściwego prodziekana	Kinga SŁOMIŃSKA, MSc (Ms)
E-mail: xxx	E-mail: kinga.slominska@up.lublin.pl
Date	Date
Signature (and Stamp)	Signature (and Stamp)
Stamp of the Institution	

Komentarz [u24]:
dane koordynatora wydziałowego
– prodziekan dla danego
kierunku studiów;
info dostępne na stronie:
<http://erasmus.up.lublin.pl/kordynatorzy-wydzialowi>

The RECEIVING Organisation: XXX

Supervisor at the Receiving Organisation¹⁵

Name	
Position	
E-mail: xxx	
Date	
Signature (and Stamp)	
Stamp of the Institution	

Komentarz [u25]:
a) nazwa Instytucji zagranicznej
b) Erasmus Code jeżeli jest to
uczelnia zagraniczna będąca
naszym partnerem, info dostępne
w zakładce uczelnie partnerskie na
stronie: <http://erasmus.up.lublin.pl/uczelnie-partnerskie>

Komentarz [u26]:
osoba uprawniona do podpisania
LAT w Instytucji zagranicznej

¹³ Scanned copies of signatures or digital signatures are recognised. There is no need to circulate papers with original signatures.

¹⁴ **Responsible person at the Sending Institution:** this person is responsible for signing the Learning Agreement, amending it if needed and recognising the credits and associated learning outcomes on behalf of the responsible academic body as set out in the Learning Agreement. an academic who has the authority to approve the Learning Agreement , to exceptionally amend it when it is needed, as well as to guarantee full recognition of such programme on behalf of the responsible academic body.

¹⁵ **Supervisor at the Receiving Institution:** : this person is responsible for signing the Learning Agreement, amending it if needed, supervising the trainee during the traineeship and signing the Traineeship Certificate and Confirmation of Stay and Transcript of Records.



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DURING THE MOBILITY

Table A2 – Exceptional Changes to the TRAINEESHIP Programme at the Receiving Organisation/Enterprise

Planned period of the mobility: from [dd/month/year] XX/XX/XXXX till [dd/month/year] XX/XX/XXXX		
Number of working hours per week: XXX		
Traineeship title: XXX		
Detailed programme of the traineeship:		
Tasks of the trainee : TO FILL OUT		
Knowledge, skills and competences to be acquired by the trainee at the end of the traineeship (expected Learning Outcomes): TO FILL OUT		

Monitoring Plan:		
<u>Monitoring activities of the Sending Institution</u>		
<input type="checkbox"/> every 2 weeks on Monday: an Email from the trainee with a short report (an electronic version of the monitoring form will be sent before the departure of the trainee), <input type="checkbox"/> Optionally (choose relete): <input type="checkbox"/> at the end of the first month: monitoring visit of Home University representatives <input checked="" type="checkbox"/> X on the request the progress report will be sent out the sending institution <input type="checkbox"/> Other - Sending Institution decides:		
<u>Monitoring activities of the tutor from the Receiving Organisation/Enterprise</u>		
<input type="checkbox"/> job shadowing, executing tasks given by the tutor. <input type="checkbox"/> everyday monitoring of the trainee work and verbal feedback at the end of each day <input type="checkbox"/> after the first, second and third month of the placement: Email from the tutor with the short report (an electronic version of the monitoring form will be sent to tutor before the trainee's arrival) <input type="checkbox"/> weekly plan: - Mondays: Weekly plan will be provided to the trainee. - Wednesdays: Check points - what has been done, evaluate the on-going work. - Fridays: Evaluation of the week work done, encounter the problems and provide solutions. Signing the weekly report prepared by trainee. - weekly study meeting <input type="checkbox"/> Other - Receiving Organisation/Enterprise decides:		

Evaluation Plan :		
<u>Evaluation activities by the tutor from the Receiving Organisation/Enterprise</u> :		
<ul style="list-style-type: none"> ▪ preparing the Confirmation of Stay and Transcript of Work at the end of the traineeship including an evaluation of the trainee's performance of essential tasks ▪ preparing the Traineeship Certificate confirming that all agreed tasks were done <input type="checkbox"/> Other – Receiving Organisation/Enterprise decides:		
<u>Evaluation activities of the Sending Institution</u> :		
<ul style="list-style-type: none"> ▪ preparing a final evaluation on the basis of all monitoring and evaluation activities and the Transcript of Work/Traineeship Certificate ▪ recognition of the traineeship by the person responsible for traineeships (e.g. deputy dean) 		

Komentarz [u27]: wypełnia student w porozumieniu z osobą kontaktową i opiekunem praktyk w organizacji przyjmującej za granicą

Komentarz [u28]:
BARDZO WAŻNE !!
Zmiany do LAT
- należy wprowadzić i zyskać podpisy w ciągu 1 miesiąca po przybyciu do Instytucji zagranicznej

Komentarz [u29]:
BARDZO WAŻNE !!
Należy wpisać daty dневные pobytu ustalone z organizacją przyjmującą. Według tych dat zostanie naliczone stypendium, a student będzie zobowiązany dostarczyć zaświadczenie o odbytej mobilności.

Komentarz [u30]: praca w pełnym wymiarze godzin od **35** do **40** godzin tygodniowo

Komentarz [u31]: podać tytuł praktyki

Komentarz [u32]: należy uzgodnić i organizacja przyjmująca; zadania jakie będzie wykonywać praktykant

Komentarz [u33]: należy podać jakie:
a) **wiedze**,
b) **umiejętności**, w podziale na: - **akademickie**,
- **techniczne**,
- **językowe**,
- **interpersonalne**,
- **personalne**
i/ lub
- **inne**)
c) **kompetencje**
nabędzie praktykant na zakończenie praktyki poprzez wykonywanie zadania

Komentarz [u34]:
UWAGA:
proszę nie zmieniać tego co zaznaczone

Komentarz [u35]: należy wypełnić w uzgodnieniu z organizacją przyjmującą

Komentarz [u36]: należy wypełnić w uzgodnieniu z organizacją przyjmującą



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STUDENT'S NAME

RESPONSIBLE PERSONS

The student

Student's signature Date:

The Sending Institution: PL LUBLINO4

The Responsible person at the Sending Institution¹⁶

Faculty Coordinator	Institutional Coordinator
XXX – wpisać dane właściwego prodziekana	Kinga SŁOMIŃSKA, MSc (Ms)
E-mail: xxx	E-mail: kinga.słominska@up.lublin.pl
Date	Date
Signature (and Stamp)	Signature (and Stamp)
Stamp of the Institution	

Komentarz [u37]:
dane koordynatora wydziałowego
– prodziekan dla danego
kierunku studiów;
info dostępne na stronie:
<http://erasmus.up.lublin.pl/kordynatorzy-wydzialowi>

The RECEIVING Organisation: **XXX**

Supervisor at the Receiving Organisation¹⁷

Name	
Position	
E-mail: xxx	
Date	
Signature (and Stamp)	
Stamp of the Institution	

Komentarz [u38]:
a) nazwa Instytucji zagranicznej
b) Erasmus Code jeżeli jest to
uczelnia zagraniczna, info
dostępne w zakładce uczelnie
partnerstkie na stronie: <http://erasmus.up.lublin.pl/uczelnie-partnerskie>

Komentarz [u39]:
osoba uprawniona do podpisania
LAT w Instytucji zagranicznej

¹⁶ **Responsible person at the Sending Institution:** this person is responsible for signing the Learning Agreement, amending it if needed and recognising the credits and associated learning outcomes on behalf of the responsible academic body as set out in the Learning Agreement. – an academic who has the authority to approve the Learning Agreement , to exceptionally amend it when it is needed, as well as to guarantee full recognition of such programme on behalf of the responsible academic body.

¹⁷ **Supervisor at the Receiving Institution:** : this person is responsible for signing the Learning Agreement, amending it if needed, supervising the trainee during the traineeship and signing the Traineeship Certificate and Confirmation of Stay and Transcript of Records.