**INSTRUCTIONS for filling in the - Research/teaching/training plan**

***Academic – Administrative Staff***

**Please read through the information below before filling in and uploading your plan in the online application!**

* This document is a proposal agreed by the candidate and Universities involved in the mobility (Home and Host Universities), certifying the interest of the parties to implement the activity. This must be accompanied by the Letter of interest
* This letter from the **host university** aims to specify their academic interest in hosting the applicant. The letter of interest needs to be filled in and signed by the academic coordinator at the host university.
* Contact the host university, get the formal approval of the Research/teaching/training programme and the signature of the Letter of Interest from the host University before submitting their application.
* Selected candidates must provide the original Research/teaching/training plan signed by academic coordinator at home university within one month after the arrival.
* Choose **areas** which are actually **offered** to **ASSUR** applicants **at your chosen host universities**
* If you apply for **two or three host universities**, you need to fill in and upload **two or three separate plans and Letters of interest**

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| **Please note:** The instructions above are only for your information. You do not need to upload this page in the online application. Only upload the learning agreement itself. |

**Research/teaching/training plan**

**for *Academic and Administrative Staff***

**ACADEMIC YEAR 2016/2017 - FIELD OF RESEARCH/TEACHING/TRAINING:**

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| Name of scholar:      Sending institution:       Country:      Receiving institution:       Country:       |

**Please give the details of your current activities:**

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| Name of the Home University  |  |
| Name of faculty/ department/other unit to which you belong:  |  |
| Name of head of this unit: |  |
| Phone and e-mail of your supervisor |  |
| Topic/ theme of your studies/work/research |  |

**Mobility project proposal**

1. Present the subject of your thesis or the Research/teaching/training project that you want to carry out in the host university. This project must suit to interest of hosting faculty/ department/unit research interest and expertise (max. 20 lines)

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**Post-mobility project**

Describe how will you share/ introduce/ implement your knowledge, skills, methods, ideas, solutions gained during your mobility abroad with/to your home university/ its scientific community after return - please give concrete actions, other persons involved etc. (max. 20 lines).

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| Applicant’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:  |

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| **SENDING INSTITUTION** *(signatures to be obtained after the start of the mobility)*We confirm that the proposed Research/teaching/training plan is approved and will be recognized at our university once the scholar returns from his/her mobility.. |
| **Academic Coordinator** at Faculty/Department Level\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name in BLOCK LETTERS and SIGNATURE)Date:  | **ASSUR contact person** at sending institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name in BLOCK LETTERS and SIGNATURE)Date:  |

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| **RECEIVING INSTITUTION** *(signatures to be obtained after the start of the mobility)*We confirm that the courses/activities indicated in this learning agreement are approved. |
| **Academic Coordinator** at Faculty/Department Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name in BLOCK LETTERS and SIGNATURE)Date:  | **ASSUR contact** person at receiving institution\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name in BLOCK LETTERS and SIGNATURE)Date:  |