CONSORZIO ILO-2 TRAINEESHIP PROPOSAL FORM
a.y. 2020/2021

We hereby confirm that we will host Mr/Ms ________________________________, Student from the University of Pisa, as an Erasmus+/Consorzio ILO-2 trainee in our Organization/Enterprise, if he/she obtains a contribution under the University of Pisa’s Erasmus+ scheme.

We intend to entrust him/her with tasks and responsibilities according to his/her studies, qualifications and knowledge.

Traineeship duration period: From _____________ To _______________ # months __________

Main language of work
The main language of work will be __________________________ [indicate here the main language of work]

Traineeship in Digital Skills
Yes ☐ No ☐
If yes, your traineeship offer is/was published on the following platforms: http://erasmusintern.org Yes ☐ No ☐

Contents/Tasks of the proposed traineeship
Detailed description of trainee’s tasks: ____________________________________________________________
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Short description of Organization/Enterprise’s activities: _________________________________________
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1 Will be considered as a “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.
Information about the receiving Organisation/Enterprise

Full legal name of receiving Organisation/Enterprise: ________________________________

Receiving Organisation/Enterprise PIC (if applicable): ______________________________

Receiving Organisation/Enterprise Erasmus Code (if applicable): ______________________

Receiving Organisation/Enterprise Public body: Yes ☐ No ☐

Receiving Organisation/Enterprise non-profit: Yes ☐ No ☐

Receiving Organisation/Enterprise size: <250 employees ☐ >250 employees ☐

Country: ___________________________ Address: ______________________________ Post Code: __________

City: ______________________________ e-mail: ________________________________

Web site: ____________________________ Tel.: ___________________________ Fax: ______________________

Name of legal head: ___________________________ Position: _________________________

e-mail: ______________________________ Tel.: ________________________________

Name of supervisor: ________________________ Position: __________________________

e-mail: ______________________________ Tel.: ________________________________

Signatures

Name of Receiving Organisation/Enterprise legal representative: ________________________________

Date: ___________________________ Signature: ________________________________

The sending Institution: Università di Pisa

Name of International Area Coordinator: ________________________________

Date: __________________________ Signature for acknowledgement ________________________________

N.B. All fields are mandatory.