

ERASMUS TRAINEESHIP PROPOSAL FORM

We hereby confirm that we will host Mr/Ms _____,

Student from the University of Pisa, as an Erasmus 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 _____
- *For students (blended short mobility):* from _____ To _____
days _____ (from 5 to 30 days)

Main language of work

The level of language competence in _____ [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

Traineeship in Digital Skills¹ Yes (Advanced) No

If yes, your traineeship offer is/was published on the following platforms: <http://erasmusintern.org>

Yes No

Contents/Task of the proposed traineeship

Detailed description of trainee's tasks:

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.

Short description of Organization/Enterprise's activities:

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

On behalf of the receiving Organisation/Enterprise: _____

Date: _____ Signature: _____

The sending Institution: Università di Pisa

Name of International Area Coordinator: _____ Date: _____

Signature for acknowledgement _____

N.B. All fields are mandatory.