

**Erasmus+ MOBILITY AGREEMENT FOR SCHOOL STAFF and QUALITY COMMITMENT for school education**

**I. DETAILS ON THE PARTICIPANT**

Name of the participant:

Sending institution (name, address):

Contact person (name, function, e-mail, tel):

**II. DETAILS OF THE PROPOSED PROGRAMME ABROAD**

Receiving organisation (name address):

Contact Person (name, function, e-mail, tel):

Planned dates of start and end of the mobility period:

**Detailed programme of the mobility period:**

**Tasks of the participant before, during and after:**

**Competences to be acquired by the participant:**

**Monitoring and Mentoring of the participant before, during and after the mobility:**

**Evaluation and Recognition of the mobility:**

### III. COMMITMENT OF THE PARTIES INVOLVED

**By signing this document, the participant, the sending organisation and the receiving organisation confirm that they will abide by the principles of the Quality Commitment attached below.**

#### THE PARTICIPANT

Participant's signature

..... Date: .....

#### THE SENDING INSTITUTION

We confirm that this proposed mobility agreement is approved.

On completion of the mobility the institution will issue .....[...a Europass Mobility, *other form of validation/recognition...*] to the participant

Coordinator's signature

..... Date: .....

#### THE RECEIVING ORGANISATION

We confirm that this proposed mobility agreement is approved.

On completion of the mobility the organisation will issue [...a *Certificate* ...] to the participant

Coordinator's signature

..... Date: .....