



Mobility Agreement Staff Mobility For Teaching¹

Planned	period (of the	teaching	activity:	from	[day/m	nonth/ye	ar] till	[day/m	onth/y	ear]
Duration	ı (days)	– exc	luding tra	avel days	:						

The teaching staff member

Last name (s)	First name (s)	
Seniority ²	Nationality ³	
Sex [<i>M/F</i>]	Academic year	20/20
E-mail		

The Sending Institution/Enterprise⁴

Name	Hochschule Landshut University of Applied Sciences				
Erasmus code ⁵ (if applicable)	D LANDSHU01	Faculty/Department	International Office		
Address	Am Lurzenhof 1 Landshut	Country/ Country code ⁶	Germany		
Contact person	Andrea Kilb	Contact person	andrea.kilb@		
name and position	Erasmus-Coordinator	e-mail / phone	haw-landshut.de		
Type of enterprise: NACE code ⁷	Р	Size of enterprise (if applicable)			
(if applicable)					

The Receiving Institution

Name	Faculty/Department	
Erasmus code (if applicable)		
Address	Country/ Country code	
Contact person name and position	Contact person e-mail / phone	

For guidelines, please look at the end notes on page 3.





Section to be completed BEFORE THE MOBILITY

Ma	
	in subject field ⁸ :
су	vel (select the main one): Short cycle (EQF level 5) \Box ; Bachelor or equivalent first cle (EQF level 6) \Box ; Master or equivalent second cycle (EQF level 7) \Box ; Doctoral or uivalent third cycle (EQF level 8) \Box
Nu	mber of students at the receiving institution benefiting from the teaching programme:
Nu	mber of teaching hours:
La	nguage of instruction:
С	verall objectives of the mobility:
С	ontent of the teaching programme:
С	ontent of the teaching programme:
	ontent of the teaching programme: xpected outcomes and impact (e.g. on the professional development of the





II. COMMITMENT OF THE THREE PARTIES

By signing) this document, the teaching staff member, the sending institution/enterprise and the receiving institution confirm that they approve the proposed mobility agreement.

The sending higher education institution supports the staff mobility as part of its modernisation and internationalisation strategy and will recognise it as a component in any evaluation or assessment of the teaching staff member.

The teaching staff member will share his/her experience, in particular its impact on his/her professional development and on the sending higher education institution, as a source of inspiration to others.

The teaching staff member and the beneficiary institution commit to the requirements set out in the grant agreement signed between them.

The teaching staff member and the receiving institution will communicate to the sending institution/enterprise any problems or changes regarding the proposed mobility programme or mobility period.

The teaching staff member			
Name:			
Signature:	Date:		
The sending institution/enterprise			
Name of the responsible person:			
Signature:	Date:		
The receiving institution			
Name of the responsible person:			
Signature:	Date:		

¹ In case the mobility combines teaching and training activities, **this template** should be used and adjusted to fit both activity types.

 $^{^2}$ **Seniority:** Junior (approx. < 10 years of experience), Intermediate (approx. > 10 and < 20 years of experience) or Senior (approx. > 20 years of experience).

³ **Nationality:** Country to which the person belongs administratively and that issues the ID card and/or passport.

⁴ All references to "**enterprise**" are only applicable to mobility for staff between Programme Countries or within Capacity Building projects.

⁵ **Erasmus Code:** A unique identifier that every higher education institution that has been awarded with the Erasmus Charter for Higher Education receives. It is only applicable to higher education institutions located in Programme Countries.

⁶ Country code: ISO 3166-2 country codes available at: https://www.iso.org/obp/ui/#search.