**E**R**ASMUS+ STAFF Mobility for Training**

**Training Programme – Academic Year 20…/…**

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| **Name, surname of teacher** | | |  | | | | | | | | | |
| **Duration of stay** | | | **Number of days** | |  | | **From - to** | |  | | | |
|  | | | | | | | | | | | | |
| **Name of home institution** | | | Istituto Superiore di Musica “A. Toscanini” | | | | | | | | | |
| **ERASMUS Code** | | | I AGRIGEN02 | | | | | | | | | |
| **Name of contact person** | | | Marina Vermiglio | | | | | | | | | |
| **position** | | | Erasmus Office | | | | | | | | | |
| **Telephon and email** | | | (+39) 0925/61280 - erasmus@istitutotoscanini.it | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Subject area of teaching programme** | | |  | | | **Level** | | | | **□** | **Bachelor** | |
| **□** | **Master** | |
| **Number of students at the receiving institution benefiting from the teaching programme** | | |  | | | | | | | | | |
| **Number of teaching hours** | | |  | | | | | | | | | |
| **Training Programme** | | | | | | | | | | | | |
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| **Overall objectives of the mobility:** | | | | | | | | | | | | |
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| **Added value of the mobility (both for the institutions involved and for the staff member):** | | | | | | | | | | | | |
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| **Activities to be carried out** | | | | | | | | | | | | |
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| **Expected outcomes and impact:** | | | | | | | | | | | | |
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|  | |
| **Staff member’s signature** | | |  | | | | | | | | | |

Done at ………., Date\_\_\_\_\_\_\_\_\_