

Swiss-European Mobility Programme – Staff Mobility for Training

**Mobility Agreement**

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| **Name of staff member:**  |

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| **Home institution**  |
| **Name**:**City, country:****Department**:**Name of contact person**:**Position of contact person**: |

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| **Host institution or enterprise** |
| **Name:****Name of the institution department or enterprise department:****City, country**:**Name of contact person**:**Position of contact person**:**Size of the enterprise:**

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| small (up to 50 staff) |[ ]
| medium (51-500 staff) |[ ]
| large (more than 500 staff) |[ ]

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| **Duration of the mobility** (dd-mm-20yy – dd-mm-20yy)**:** **-** |

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| **Overall objectives of the mobility**: |

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| **Added value of the mobility (both for the home institution and the staff member):** |

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| **Activities to be carried out and, if possible, the programme for the period**: |

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| **Expected results**: |

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| **Signature of the direct supervisor validating the training:****Name and function of the signatory:** |

**To be formally agreed prior to the mobility period by all parties by exchange of letters or electronic messages.**