

“Ex-ante”- confirmation from the host institution concerning a traineeship within the framework of the EU-Programme Erasmus+

Host company/institution/organisation

Name of host institution:			
Division of traineeship:			
Street:		Postal code:	
City:		Country:	
Legal status	<input type="checkbox"/> private <input type="checkbox"/> public	Commercial Orientation	<input type="checkbox"/> profit-oriented <input type="checkbox"/> non-profit
Main activity of host institution:			
http:			
No. of permanent staff in the team hosting the intern:		No. of other interns hosted at the same time in this team:	

Type of organisation

<input type="checkbox"/> 1-250 employees	<input type="checkbox"/> Public Authority
<input type="checkbox"/> > 250 employees	<input type="checkbox"/> NGO
	<input type="checkbox"/> Research Institution
<input type="checkbox"/> Other Institution, please specify:	

Contact person (e.g. HR department, head of department, etc.)

Title:	Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Mr. <input type="checkbox"/>	Academic Title (e.g. Prof., Dr. etc.):	
Last name:		First name:	
Division:		Position	
Phone:		Email:	

Person in charge at workplace (mentor):

Title:	Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Mr. <input type="checkbox"/>	Academic Title (e.g. Prof., Dr. etc.):	
Last name:		First name:	
Division:		Position	
Phone:		Email:	

We hereby confirm that we are willing and prepared to accept the below-mentioned trainee on full-time basis in our company/institution. We intend to give her/him tasks and responsibilities in accordance with her/his qualifications and theoretical knowledge acquired during the studies. We will co-operate with the LEONARDO-Office Brandenburg in the preparation and evaluation of the placement.

Intern

First name:		Last name:	
First working day:		Last working day:	
Duration in month:		Study course of student:	
Scope/ field of work:		Required skills:	

Language Skills required

The main working language is:		Required level:	A1 <input type="checkbox"/>	A2 <input type="checkbox"/>	B1 <input type="checkbox"/>	B2 <input type="checkbox"/>	C1 <input type="checkbox"/>	C2 <input type="checkbox"/>
For the Common European Framework of Reference for Languages (CEFR) see http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr								

Contents/tasks (Please give a precise and detailed description of the intern's tasks):

Mentoring / Evaluation Plan

The trainee will be monitored in one/more of the following ways (e.g. daily, weekly, monthly and/or reports, presentations etc.) Please specify:	
Participation in work meetings foreseen:	<input type="checkbox"/> yes <input type="checkbox"/> no
I assure that the intern will have his/her own workplace and receive all equipment necessary for the traineeship	<input type="checkbox"/> yes

Normal working hours/week

working days/week:	Mo-Fr <input type="checkbox"/>	Mo-Sa <input type="checkbox"/>	Mo-Su <input type="checkbox"/>
normal working hours/week:	<input type="checkbox"/> 35-40 hours (full-time)	<input type="checkbox"/> overtime is not the rule - overtime work will be compensated by free time	

Insurance Coverage

Liability insurance coverage Against damages caused by the trainee at the work place is covered by our company / organisation.	<input type="checkbox"/> yes <input type="checkbox"/> no
Accident insurance coverage Against accidents at work is covered by our company / organisation.	<input type="checkbox"/> yes <input type="checkbox"/> no
If yes, please specify if it covers also:	
- accidents during travels made for work purposes:	<input type="checkbox"/> yes <input type="checkbox"/> no
- accidents on the way to work and back from work:	<input type="checkbox"/> yes <input type="checkbox"/> no

Remuneration / month (please tick and enter figures)

	Amount	
No remuneration at all (only acceptable for short stays):	<input type="checkbox"/>	
Traineeship remuneration:	<input type="checkbox"/>	€ per month
Benefits in kind for	<input type="checkbox"/>	<u>equates to €:</u>
please specify (tick):	<input type="checkbox"/> accommodation <input type="checkbox"/> transportation <input type="checkbox"/> meals <input type="checkbox"/> other	

I confirm that the intern is not financed by EU money.

Date:

Signature of person responsible:

Institution stamp