



Co-funded by the
Erasmus+ Programme
of the European Union

Consortium Agreement Among Academic and Sport Institutions

Intellectual Output 3

Learning Agreement Annex II

ST/CK PROJECT	SPORT AND ACADEMIC TALENT INTEGRATION THROUGH EXCHANGE PROGRAMMES IN HOCKEY			
 NOTTINGHAM TRENT UNIVERSITY		 UAB Universitat Autònoma de Barcelona	 Université Antwerpen	 DCU

STICK PROJECT
Erasmus+ Programme:
Support for Collaborative Partnership
in the field of Sport

INSTRUCTIONS for filling in a LEARNING/TRAINING AGREEMENT

UNDERGRADUATE EXCHANGE

Please read through the information below before filling in and uploading your learning agreement in the online application!

- ▶ Discuss and agree your academic programme with your **local academic coordinator**
 - ▶ Choose **courses/activities of relevance** to your study programme at your home university so that the courses/activities completed during your mobility will be **recognized** as counting towards your degree
 - ▶ Choose **courses** which are actually **offered** to Erasmus students **at your chosen host universities**
 - ▶ Agree with your local academic co-ordinator, in advance, how many ECTS credits need to be completed at the host university

- ▶ Discuss and agree your athletic training programme with your **home Club Co-Ordinator**
- ▶ Before sending your learning/training agreement to the host university/club the document needs to be **signed by**
 - ▶ you and the **home and host Academic Coordinators** for the learning part of the document
 - ▶ **you, the Dual Career home and host Co-Ordinators** and the home and host hockey **Club Co-Ordinators** for the athletic training part of the document.

The **signatures of the host university and club** *can be obtained after the start of mobility.*

ACADEMIC YEAR 2019/2020
LEARNING AGREEMENT for UNDERGRADUATE EXCHANGE students
FIELD OF STUDY:

Name of student:	
Sending institution:	Country:
Receiving institution:	Country:

Before the Mobility

Course unit code	Course unit title	Number of ECTS credits

Add lines if necessary

Student's signature	Date:
_____	_____

SENDING INSTITUTION

We confirm that the courses/activities indicated in this learning agreement are approved and will be recognized at our university once the student returns from his/her mobility.

Local Academic Coordinator at Erasmus Office, Home University

(name in BLOCK LETTERS and SIGNATURE)

Date: _____

RECEIVING INSTITUTION (*signatures to be obtained after the start of the mobility*)

We confirm that the courses/activities indicated in this learning agreement are part of the curriculum at our university and that they can be offered to the student.

Local Academic Coordinator at Erasmus Office, Host University

(name in BLOCK LETTERS and SIGNATURE)

Date: _____

During the Mobility

CHANGES TO THE LEARNING AGREEMENT as originally proposed when applying for programme exchange:

(to be filled in only if you need to change your learning agreement upon starting your mobility)

Course unit code	Course unit title	Deleted course unit	Added course unit	ECTS credits
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

Add lines if necessary

Student's signature

Date:

SENDING INSTITUTION

We confirm that the courses/activities indicated in this learning agreement are approved and will be recognized at our university once the student returns from his/her mobility.

Local Academic Coordinator at Erasmus Office, Home University

(name in BLOCK LETTERS and SIGNATURE)

Date:

RECEIVING INSTITUTION *(signatures to be obtained after the start of the mobility)*

We confirm that the courses/activities indicated in this learning agreement are part of the curriculum at our university and that they can be offered to the student.

Local Academic Coordinator at Erasmus Office, Host University

(name in BLOCK LETTERS and SIGNATURE)

Date:



TRAINING AGREEMENT for UNDERGRADUATE EXCHANGE students

Athletic Training Programme at the Host Sports Club

Planned period of the mobility: from [month/year] to [month/year]

Sending Sports Club:

Country:

Receiving Sports Club:

Country:

Athlete Name: ...

Number of working hours per week: ...

Detailed programme of athletic training:

Skills development & enhancement, and competences to be acquired by the end of the programme (expected Athletic Outcomes):

Monitoring plan:

Evaluation plan:

By signing this document, the athlete, the Home Sports Club and the Host Sports Club confirm that they approve the Athletic Training Programme and that they will comply with all the arrangements agreed by all parties. The trainee and Host Sports Club will communicate to the Home Sports Club any problem or changes regarding the training programme period. The Home Sports Club and the trainee should also commit to what is set out in the Erasmus+ grant agreement. The institution undertakes to respect all the principles of the Erasmus Charter for Higher Education relating to Sport.

Commitment	Name	Email	Position	Date	Signature
Athlete			Visiting Athlete		
Club Co-Ordinator at the Home Sports Club					
Dual Career Co-Ordinator, Home University					
Club Co-Ordinator at the Host Sports Club					
Dual Career Co-Ordinator, Host University					

During the Mobility

Exceptional Changes to the Athletic Training Programme at the Host Sports Club

(to be approved by e-mail or signature by the athlete, the Club Co-Ordinator in the Home Sports Club and the Club Co-Ordinator in the Host Sports Club)

Planned period of the mobility: from [month/year] till [month/year]

Athlete Name: ...	Number of working hours per week: ...
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Detailed programme of the athletic training:

Skills development & enhancement, and competences to be acquired by the end of the programme (expected Athletic Outcomes):

Monitoring plan:

Evaluation plan:

By signing this document, the athlete, the Home Sports Club and the Host Sports Club confirm that they approve the Athletic Training Programme and that they will cover all the arrangements agreed by all parties. The trainee and Host Sports Club will communicate to the Home Sports Club any problem or changes regarding the training period. The Home Sports Club and the trainee should also commit to what is set out in the Erasmus+ grant agreement. The institution undertakes to respect all the principles of the Erasmus Charter for Higher Education relating to Sport.

Commitment	Name	Email	Position	Date	Signature
Athlete			Visiting Athlete		
Club Co-Ordinator at the Home Sports Club					
Dual Career Co-Ordinator, Home University					
Club Co-Ordinator at the Host Sports Club					
Dual Career Co-Ordinator, Host University					

After the Mobility

Athletic Training Certificate by the Host Sports Club

Name of the athlete:

Name of the Host Sports Club:

Address of the Host Sports Club: [street, city, country, phone, e-mail address], **website:**

Start date and end date of training programme: from [day/month/year] to [day/month/year]

Detailed programme of actual activities/training carried out by athlete:

Detailed explanation of how athletic outcomes were achieved:

Evaluation of the athlete:

Date:

Name and Signature of Dual Career Co-Ordinator at host university

Name and signature of the Club Co-Ordinator at Host Sports Club: