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| --- | --- | --- | --- | --- | --- | --- | --- |
| Holder of the document | | | |  |  | | |
| 1 | SURNAME(S) \* | | | 2 FIRST NAME(S) \* | 3 ADDRESS | | |
| Replace with text | | | | Replace with text | Replace with text Replace with text Replace with text | | |
| 4 | DATE OF BIRTH | | | 5 NATIONALITY |
|  | 09  dd | 09  mm | 2000  yyyy | Replace with text |  | | |
| Issuing organisation | | | |  |  | | |
| 6 | NAME OF THE ORGANISATION \* | | | 7 DOCUMENT NUMBER \* | 8 ISSUING DATE \* | | |
| Replace with text | | | | Replace with text | 09  dd | 09  mm | 2000  yyyy |
| Sending partner | | | |  |  | | |
| 9 | NAME AND ADDRESS \* | | |  | 10 STAMP AND/OR SIGNATURE | | |
| Replace with text Replace with text Replace with text Replace with text | | | |  |  | | |
| 11 | SURNAME(S) AND FIRST NAME(S) OF REFERENCE PERSON/MENTOR \* | | | | 12 TELEPHONE | | |
| Replace with text | | | |  | Replace with text | | |
| 13 | TITLE/POSITION | | |  | 14 E-MAIL | | |
| Replace with text | | | |  | Replace with text | | |
| Host partner | | | |  |  | | |
| 15 | NAME AND ADDRESS \* | | |  | 16 STAMP AND/OR SIGNATURE | | |
| Replace with text Replace with text Replace with text Replace with text | | | |  |  | | |
| 17 | SURNAME(S) AND FIRST NAME(S) OF REFERENCE PERSON/MENTOR \* | | | | 18 TELEPHONE | | |
| Replace with text | | | |  | Replace with text | | |
| 19 | TITLE/POSITION | | |  | 20 E-MAIL | | |
| Replace with text | | | |  | Replace with text | | |

* Headings marked with an asterisk are mandatory.

Europass Mobility is a standard European document, which records details of the contents and the results - in terms of skills and competences or of academic achievements - of a period that a person of whatever age, educational level and occupational status has spent in another European country (UE/EFTA/EEA and candidate countries) for learning purposes.

# Description of the mobility experience



* 1. OBJECTIVE OF THE MOBILITY EXPERIENCE \*

## Replace with text

* 1. EDUCATION OR TRAINING INITIATIVE IN THE COURSE OF WHICH THE MOBILITY EXPERIENCE WAS COMPLETED

## Replace with text

* 1. COMMUNITY OR MOBILITY PROGRAMME INVOLVED

## Replace with text

DURATION OF THE EUROPASS MOBILITY EXPERIENCE

24 FROM \* 09 09

dd mm

## 2000

yyyy

25 TO \* 09

dd

## 09 2000

mm yyyy

# Skills acquired during the mobility experience



26A ACTIVITIES/TASKS CARRIED OUT \*

## Replace with text.

27A JOB-RELATED SKILLS

## Replace with text

28A LANGUAGE SKILLS

## Replace with text

29A COMPUTER SKILLS

## Replace with text

30A ORGANISATIONAL / MANAGERIAL SKILLS

## Replace with text

31A COMMUNICATION SKILLS

## Replace with text

32A OTHER SKILLS

## Replace with text

33A DATE \* 34A SIGNATURE OF THE REFERENCE PERSON/MENTOR \*

35A SIGNATURE OF THE HOLDER

## 09 09

dd mm

## 2000

yyyy

# Record of courses completed and individual grades / marks / credits obtained



26B STUDENT MATRICULATION NUMBER \* Replace with text

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 27B COURSE UNIT  CODE 1 | 28B TITLE OF THE COURSE UNIT \* | 29B DURATION 2 \* | 30B LOCAL GRADE 3 \* | 31B ECTS/ECVET GRADE | 32B ECTS/ECVET CREDITS 4 |
|  |  |  |  |  |  |
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Add or remove lines if required.

33B ESSAY/REPORT/DISSERTATION

## Replace with text

34B CERTIFICATE/DIPLOMA/DEGREE AWARDED, if any

## Replace with text

35B SURNAME(S) AND FIRST NAME(S) OF MENTOR/ADMINISTRATION OFFICER \* 36B SIGNATURE OF THE HOLDER

## Replace with text

37B DATE OF VALIDATION \*

## 09 09

dd mm

## 2000

yyyy

38B NAME AND ADDRESS OF THE INSTITUTION \* 39B STAMP AND/OR SIGNATURE

## Replace with text Replace with text Replace with text Replace with text

1 COURSE UNIT CODE: Refer to the ECTS information Package provided on the website of the host institution

2 DURATION OF COURSE UNIT: Y = 1 full academic year | 1S = 1 semester | 2S = 2 semesters | 1T = 1 term/trimester | 2T = 2 terms/trimesters

3 DESCRIPTION OF THE INSTITUTIONAL GRADING SYSTEM:

4 ECTS CREDITS: 1 full academic year = 60 credits | 1 semester = 30 credits | 1 term/trimester = 20 credits