

VODIČ ZA „ONLINE LEARNING AGREEMENT“ ZA STRUČNU PRAKSU - „TRAINEESHIP“

Na službenoj web stranici www.learning-agreement.eu student kreira Online Learning Agreement (u nastavku OLA) dokument u sekciji „For Trainees“.

1. Trainee

Dodajte informacije o sebi i svom području studija. U polju „Academic year“ trebali biste još jednom provjeriti jesu li podaci točni. Potrebno je označiti cijelu akademsku godinu čak i ako idete samo na semestar.

Trainee Information

Nationality *

Antigua and Barbuda

Nationality: country to which the person belongs administratively and that issues the ID card and/or passport.

Date of birth *

12/06/2024

Sex *

Male

Female

Trainee ID number

Not necessary

Phone Number

At Trainee's home/sending institution

Numbers, spaces and '+' symbol are accepted

Study cycle *

Bachelor or equivalent first cycle (EQF 6)

Academic Year *

2021/2022

Field of education *

0913 - Nursing and midwifery

The ISCED-F 2013 search tool available at http://ec.europa.eu/education/international-standard-classification-of-education-isced_en should be used to find the ISCED 2013 detailed field of education and training that is closest to the subject of the degree to be awarded to the Trainee by the Sending Institution.

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2. Sending Institution

Odaberite Sveučilište Jurja Dobrile u Puli te unesite podatke [kontakt osobe](#) na vašoj sastavnici.

Sending institution

Sending institution name *

Address

Country

Erasmus Code

Faculty/Department *

Contact person name *

Person who provides a link for administrative information and who, depending on the structure of the higher education institution, may be the departmental coordinator or works at the international relations office or equivalent body within the institution.

Contact person email *

Contact person phone

Numbers, spaces and '+' symbol are accepted

< PREVIOUS

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3. Receiving Institution

Dodajte informacije o prihvatnoj instituciji i kontakt podatke.

Receiving Organisation/Enterprise

Receiving Organisation/Enterprise name *

The university you are going to

Department *

Name of the faculty at the university you are going to

Address *

Address of the university you are going to

Website *

www.university you are going to .abroad

Country *

Azerbaijan

Size:

The organisation has more than 250 employees:

☐

Contact person name *

HVL will provide you with this information

Person who can provide administrative information within the framework of Erasmus+ traineeships.

Contact person email *

HVL will provide you with this information

Contact person phone

Numbers, spaces and '+' symbol are accepted

Contact person position *

Mentor name *

Same person as above

Person who provides support, encouragement and information to the trainee on the life and experience relative to the enterprise (culture of the enterprise, informal codes and conducts, etc.). Normally, the mentor should be a different person than the supervisor.

Mentor email *

Same person as above

Mentor phone

Numbers, spaces and '+' symbol are accepted

Mentor position *

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4. Proposed mobility programme (part 1)

Kontaktirajte [ECTS koordinatora](#) vaše sastavnice za pomoć pri ispunjavanju obrasca. Kako biste ispunili dio „knowledge, skills and competences“ koristite se očekivanim ishodima učenja. Dodajte mjesec, godinu te prvi i zadnji dan boravka na instituciji, isključujući dane putovanja.

Proposed Mobility Programme (before the mobility)

TABLE A: TRAINEESHIP PROGRAMME AT THE RECEIVING ORGANISATION/ENTERPRISE	
Traineeship title *	Working hours per week *
Add your field of study and traineeship. Example: Nursing traineeship	
Detailed programme of the traineeship *	
Content of your traineeship Your academic contact person can help you with this	
Tasks/deliverables to be carried out by the trainee, with their associated timing.	
Knowledge, skills and competences to be acquired by the end of the traineeship (expected Learning Outcomes) *	
What is the planned learning outcome of this traineeship? Your academic contact person can help you with this	
Knowledge, intellectual and practical skills and competences (Learning Outcomes) will be acquired by the end of the traineeship, e.g. academic, analytical, communication, decision-making, ICT, innovative and creative, strategic-organisational, and foreign language skills, teamwork, initiative, adaptability, etc.	
Monitoring plan *	
How will you be monitored and followed up by the host institution? Your academic contact person can help you with this	
How and when the trainee will be monitored during the traineeship by the Receiving Organisation/Enterprise, the Sending Institution, and, if applicable, a third party.	
Evaluation plan *	
How will the host institution evaluate your work? Your academic contact person can help you with this	
Assessment criteria that will be used to evaluate the traineeship and the learning outcomes.	
Planned period of the mobility	From * --- To * ---

5. Proposed mobility programme (part 2)

Dodajte jezik za koji očekujete da će se najviše koristiti tijekom vaše stručne prakse, kao i nivo znanja koji očekujete da ćete imati na početku semestra razmjene.

Table B: Recognition at the sending institution

Odaberite „Traineeship certificate.“

▼ LANGUAGE COMPETENCE OF THE TRAINEE

The level of language competence in **No Language set** [the main language of instruction] that the Trainee already has or agrees to acquire by the start of the study period is: **No Level set**

Language *

Level *

▼ TABLE B: RECOGNITION AT THE SENDING INSTITUTION

Please use only one of the following three boxes (click to expand): *

1. The traineeship is **embedded in the curriculum** and upon satisfactory completion of the traineeship, the institution undertakes to:

Award the following amount of ECTS credits (or equivalent):

0

Give a grade based on: ☒ Traineeship certificate ☐ Final report ☐ Interview

Record the traineeship in the trainee's Transcript of Records and Diploma Supplement (or equivalent).

Record the traineeship in the trainee's Europass Mobility Document: ☐ Yes ☒ No

2. The traineeship is **voluntary** and, upon satisfactory completion of the traineeship, the institution undertakes to:

3. The traineeship is carried out by a **recent graduate** and, upon satisfactory completion of the traineeship, the institution undertakes to:

Accident insurance for the trainee

The Sending Institution will provide an accident insurance to the trainee (if not provided by the Receiving Organisation/Enterprise):

☐ Yes ☒ No

The Sending Institution will provide a liability insurance to the trainee (if not provided by the Receiving Organisation/Enterprise):

☐ Yes ☒ No

6. Responsible Persons

„Responsible Person“ je ECTS koordinator vaše sastavnice.

7. Commitment

OLA mora biti potpisan od strane studenta, ECTS koordinatora („Responsible Person“) i mentora prihvatne institucije. Nužno je da se student potpiše u okvir i pritisne gumb kako bi OLA bio poslan ECTS koordinatoru na potpis. Student ne može uređivati dokument nakon što je isti potpisao i poslao. Za svaki korak u procesu student prima obavijest e-poštom.

Ako netko od potpisnika ima komentare ili smjernice o potrebi dorade OLA, isti će biti odbijen (o čemu ćete biti obaviješteni automatskim mailom) i isti je potrebno ponovno kreirati/urediti te ponovo potpisati.

OLA za traineeship: Koristite promjene Ugovora o učenju (tijekom mobilnosti) na dnu stranice. Pritisnite tipku i unesite potrebne izmjene.