

## TRAINING AGREEMENT

### I. DETAILS OF THE STUDENT

Name of the Student: _____
Subject Area: _____ Academic Year: _____
Degree: _____
Sending Institution: Ruhr-Universität Bochum

### II. DETAILS OF THE PROPOSED TRAINING PROGRAM ABROAD

Host Organization: _____
Mentor: _____
Branch of Host Organization: _____
Working Language: _____
Size of the Organization: S (small, 1-50 members)      M (medium, 51-500 members)      L (large, >500 members)
Number of Other Students/Trainees Hosted at the Same Time in the Department (Team): _____

Planned Period of the Placement: Start (dd/mm/yyyy) _____ End (dd/mm/yyyy) _____
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Knowledge, Skills, and Competence to Be Acquired: _____ _____ _____ _____ _____
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Detailed Program of the Training Period and Tasks of the Trainee: \_\_\_\_\_

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### III. COMMITMENT OF THE TWO PARTIES

#### The Student

Student's Signature:

\_\_\_\_\_ Date (dd/mm/yyyy): \_\_\_\_\_

#### The Host Organization

The student will receive a financial support for his/her placement

No Yes, \_\_\_\_\_

We confirm that this proposed training program is approved. On completion of the training program the organization will issue a certificate to the student.

Coordinator's signature and stamp:

\_\_\_\_\_ Date (dd/mm/yyyy): \_\_\_\_\_