**ERASMUS+ Staff Mobility**

**Staff Mobility for Training (STT) Form**

**Mobility Period : 20…./20….**

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| **Home Institution (Sending Institution)** | |
| **Name of the university** | Kütahya Health Sciences University |
| **Address** | Kütahya Sağlık Bilimleri Üniversitesi Evliya Çelebi Yerleşkesi Tavşanlı Yolu 10. km 43100 KÜTAHYA/TURKEY |
| **Country** | Turkey |
| **ID Erasmus Code** | TR KUTAHYA02 |
| **Size of the institution (number of employees)** | □ 1 – 50 □ 50 – 500 X > 500 |
| **Sending section/department** |  |
| **ERASMUS Coordinator** | Emrah Tümer, MD. PhD.  E-mail Address: [iro@ksbu.edu.tr](mailto:iro@ksbu.edu.tr)  [emrah.tumer@usak.edu.tr](mailto:emrah.tumer@usak.edu.tr)  Phone Number: +90 (274) 260 00 43 |
| **ERASMUS Contact Person**  **(Contact data)** |  |

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| **Host Institution (Receiving Institution)** | | | | |
| **Name of the university** | | |  | |
| **Address** | | |  | |
|  | | |  | |
| **ID Erasmus Code** | | |  | |
| **Size of the institution (number of employees)** | | | □ 1 – 50 🞕 50 – 500 □ > 500 | |
| **Receiving section/department** | | | | |  | |
| **ERASMUS Coordinator**  **(Contact data)** | | |  | |
| **Work Programme (Work Plan)** | | | | |
| **Participant**  **(Name and contact data)** |  | | | |
| **Duration in days:** |  | | | |
| **Aims and guidelines** | | | | |
| * To allow the staff of higher education institutions to acquire knowledge or specific know-how from experiences and good practices abroad as well as practical skills relevant for their current job and their professional development; * To help building up cooperation between higher education institutions and enterprises; * To motivate students and staff to become mobile and to assist them in preparing a mobility period. | | | | |
|  | | | | |
| **Activities planned** T: Training, WS: Work Shadowing JS : Job Shadowing  O: Observation PA: Planning Activities | | | | |
| **DAY 1** | | | | |
| **DAY 2** | | | | |
| **DAY 3** | | | | |
| **DAY 4** | | | | |
| **DAY 5** | | | | |

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| **Results expected** |
| By the end of the staff training period, participants are expected to :   * gain knowledge or specific know-how from experiences * gain an insight on practices abroad as well as practical skills * increase their awareness on how Erasmus Programme is organised in a particular institution in a candidate country to the European Union. * make comparisons and draw conclusions for further coopearation and collaboration |
| This work plan must be approved by both the sending and the host institution.   |  |  |  | | --- | --- | --- | | **Home Institution** : We confirm that the above proposed work plan is approved. | | | | **Head of the Department**  Name:  Signature:  Date: | | **Institutional Erasmus Coordinator**  Name:  Signature and Stamp:  Date: | | **Host Institution**: We confirm that the above proposed work plan is approved. | | | | **Head of the Department**  Name:  Signature:  Date: | **Institutional Erasmus Coordinator**  Name:  Signature and Stamp:  Date: | | |