









### **UNITAFRICA**

Empowering the Academic Cooperation between Italy and Africa for fostering the quality and effectiveness of the higher education systems in a mutual learning environment TNE23-00050 - CUP D81I24000280007

# Transnational Education Africa Staff mobility for teaching

Planned period of the teaching activity: from till
Duration (days) – excluding travel days:
The teaching staff member
Last name
First name
Seniority:
Nationality
Sex [M/F]:
Academic year:
Department/unit
E-mail:
The Sending Institution
Name
Erasmus code (if applicable)
Faculty/Department
Adress
Country/County code
Contact person name and position
Contact person e-mail/phone
The Receiving Institution
Name:
Faculty/Department
Adress:
Contact person name and position:
Contact person e-mail / phone :











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## Transnational Education Africa Staff mobility for teaching

### **Section to be completed BEFORE THE MOBILITY**

I. PROPOSED MOBILITY PROGRAMME
Main TNE strategic thematic area:
Number of teaching hours:
Overall objectives of the mobility :
Content of the teaching programme:
Expected outcomes and impact (e.g. on the professional development of the teaching

staff member and on the competences of students at both institutions):











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## Transnational Education Africa Staff mobility for teaching

#### II. COMMITMENT OF THE THREE PARTIES

By signing<sup>i</sup> this document, the teaching staff member, the sending institution/enterprise and the receiving institution confirm that they approve the proposed mobility agreement.

The sending higher education institution supports the staff mobility as part of its modernisation and internationalisation strategy and will recognise it as a component in any evaluation or assessment of the teaching staff member.

The teaching staff member will share his/her experience, in particular its impact on his/her professional development and on the sending higher education institution, as a source of inspiration to others.

The teaching staff member and the beneficiary institution commit to the requirements set out in the grant agreement signed between them.

The teaching staff member and the receiving institution will communicate to the sending institution/enterprise any problems or changes regarding the proposed mobility programme or mobility period.

### The teaching staff member

The teaching st	411 IIICIIII
Name:	
Signature:	
Date:	

### The sending institution

Name of the	responsible	person
Signature:		
Date:		

#### The receiving institution

Name of the responsible perso	n:
Signature:	
Date:	