**Erasmus+ Learning Programme**

**for**

**Activities in Group Mobility of Adult Learners**

# Information about the learning mobility

|  |  |
| --- | --- |
| Field | Adult Education |
| Activity type: | Group Mobility of Adult Learners |
| Mode: | [Choose one: Physical OR Blended OR Virtual] |
| Start date: | [DD/MM/YYYY–first day of activity at the hosting organisation] |
| End date: | [DD/MM/YYYY - last day of activity at the hosting organisation] |
| Participants’ profile | [Briefly describe the profile of the participants in the group activity: the education programmes they are attending at their home institution; main learning needs; language competences, etc.] |

## Sending organisation

|  |  |
| --- | --- |
| Organisation name: | [[Full legal name of the hosting organisation] |
| Address: | [Full address, including country, city and post code] |

## Hosting organisation

|  |  |
| --- | --- |
| Organisation name: | [Full legal name of the hosting organisation] |
| Address: | [Full address, including country, city and post code] |

# Timetable

[Introduce the full timetable of the activity. The below table format is only a simple example that can be modified to best fit the specific activity.]

|  |  |
| --- | --- |
| **Timing** | **Activity/Session/Task** |
| [e.g. Date/Day 1 – 9:00] | [e.g. ‘Introduction’] |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

# Learning programme

[To complete this section add all of the learning activities listed under ‘Timetable’ and describe them. (In case of activities in virtual or blended mode\* - all content should be specified, including the online parts). The table below may be complemented or replaced by an annexed document; in that case appropriate text should be added to reference the document.]

The content of group mobility activities should focus on key competences of adult learners or the inclusion and diversity, digital, environmental sustainability and participatory dimensions of the programme.

|  |  |
| --- | --- |
| **Activity 1: [Title]** | |
| Learning methods: | [Describe how will the learning be organised – what methods and approaches were applied; what tasks did the participants complete] |
| Learning outcomes: | [Describe what will the participants learn during this activity in terms of new or improved knowledge, skills and competences] |

|  |  |
| --- | --- |
| **Activity 2: [Title]** | |
| Learning methods: | [Describe how will the learning be organised – what methods and approaches were applied; what tasks did the participants complete] |
| Learning outcomes: | [Describe what will the participants learn during this activity in terms of new or improved knowledge, skills and competences] |

|  |  |
| --- | --- |
| **Activity 3: [Title]** | |
| Learning methods: | [Describe how will the learning be organised – what methods and approaches were applied; what tasks did the participants complete] |
| Learning outcomes: | [Describe what will the participants learn during this activity in terms of new or improved knowledge, skills and competences] |

|  |  |
| --- | --- |
| **Activity 4: [Title]** | |
| Learning methods: | [Describe how will the learning be organised – what methods and approaches were applied; what tasks did the participants complete] |
| Learning outcomes: | [Describe what will the participants learn during this activity in terms of new or improved knowledge, skills and competences] |

|  |  |
| --- | --- |
| **Activity 5: [Title]** | |
| Learning methods: | [Describe how will the learning be organised – what methods and approaches were applied; what tasks did the participants complete] |
| Learning outcomes: | [Describe what will the participants learn during this activity in terms of new or improved knowledge, skills and competences] |

# Accompanying persons

Qualified trainers from the sending organization must accompany the learners for the entire duration of the activity and take part in the implementation of the learning programme.

The following person(s), trainer(s) or other authorized person(s) from the sending organisation, will accompany the participants and guide the learning activities, for the entire duration of the activity:

|  |  |
| --- | --- |
| Full name: |  |
| Position or qualification: |  |
| Email: |  |
| Phone number(s): |  |
| Responsibilities: |  |

|  |  |
| --- | --- |
| Full name: |  |
| Position or qualification: |  |
| Email: |  |
| Phone number(s): |  |
| Responsibilities: |  |

[Please make copies of the above table for further accompanying persons.]

# Signatures

The signatories confirm that the information in this document is correct and complete.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **For sending organisation** | |  | **For hosting organisation** | |
| Full name: |  |  | Full name: |  |
| Position: |  |  | Position: |  |
| Date and place: |  |  | Date and place: |  |
| Signature: |  |  | Signature: |  |

**Participants list**

[You can add more lines to the tables, if needed.]

# Participants

|  |  |  |
| --- | --- | --- |
| **#** | **Full name** | **Sending organisation** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |

# Accompanying persons

|  |  |  |
| --- | --- | --- |
| **#** | **Full name** | **Sending organisation** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |

# Signatures

The signatories confirm that the participants list is correct and complete.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **For sending organisation** | |  | **For hosting organisation** | |
| Full name: |  |  | Full name: |  |
| Position: |  |  | Position: |  |
| Date and place: |  |  | Date and place: |  |
| Signature: |  |  | Signature: |  |