**Erasmus+ learning programme for group activities**

# Information about the learning mobility

|  |  |
| --- | --- |
| Field | [Choose one: School education OR Adult education] |
| Activity type: | [Use the classification from the Erasmus+ Programme Guide] |
| Mode: | [Choose one: Physical OR Blended OR Virtual] |
| Start date: | [DD/MM/YYYY] |
| End date: | [DD/MM/YYYY] |
| Participants’ profile | [Briefly describe the profile of the participants in the group activity: the education programmes they are attending at their home institution; their age groups; main learning needs; language competences, etc.] |

## Sending organisation

|  |  |
| --- | --- |
| Organisation name: | [Full legal name of the sending 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. 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.]

|  |  |
| --- | --- |
| **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

The following person(s) will accompany the participants and guide the learning activities:

|  |  |
| --- | --- |
| 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**

[Please note: if you have used a different format for the participants list, it will be accepted as long as it contains at least the same information as below and it is signed by representatives of the sending and hosting organisations.]

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

# Participants

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

# Accompanying persons

|  |  |  |
| --- | --- | --- |
| **#** | **Full name** | **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: |  |