

**COMPANY AGREEMENT FORM<sup>1</sup>**  
**FOR PHD STUDENTS ONLY**  
**A.Y.2025/26**

[Please print out on company's headed paper before signing]

Please fill in the document on your computer

**TRAINEESHIP OFFER for:**

**Name and Surname of the Trainee** <sup>2</sup> .....

**Traineeship period** <sup>3</sup> .....

**Long term mobility**

☐ 2 months ☐ 3 months ☐ 4 months ☐ 5 months ☐ 6 months starting from: ..... (Any date **from 01/09/2025**)

Please consider that the activities must end **within 31/07/2026** at the latest

**OR**

**Short term mobility** (between 5 days and 30 days)

☐ .....(duration in days) from .....(Any date **from 01/09/2025**)

Please consider that the activities must end **within 31/07/2026** at the latest

Working hours per week (18 - 40 hours per week) .....

Traineeship title: .....

Traineeship in Digital Skills<sup>4</sup> ☐ Not applicable ☐ Advanced digital skills

Detailed programme of the training period<sup>5</sup> .....

Knowledge, skills, and competences to be acquired by the trainee at the end of the traineeship:

Monitoring plan .....

Evaluation plan: .....

In case the traineeship takes place in a representation or public institution of the home country of the student (e.g. cultural institutes, schools) please indicate the additional transnational benefits<sup>6</sup> .....

Main language of the traineeship: ..... **(It cannot be Italian)**

Level requested at the beginning of traineeship: B1 ☐ B2 ☐ C1 ☐ C2 ☐

(For the Common European Framework of Reference for Languages (CEFR) see <http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>)

The University of Bologna will check that the candidate is in possess of a **B1 level** knowledge of the main language of the traineeship. In alternative, if you wish, you may test by yourself the knowledge of the language which will be used during the traineeship. If you decide to test the main language of the traineeship and if you deem the level of knowledge to be appropriate, you may put a cross in the box below:

☐ I declare that the candidate has an adequate knowledge of the main language of the traineeship to carry out the training placement at our company

**Information on the host enterprise<sup>7</sup>:**

Legal name of company (use only Latin characters):.....:

Erasmus Code (if available):.....

OID (Organisation ID) Number (if available): .....

Organisation Type<sup>8</sup>: .....

VAT or Association Registration nr: ..... or ☐ not applicable

Public Body: YES [.....] NO [.....]

Non-Profit: YES [.....] NO [.....]

Short description of enterprise activities: .....

NACE Activity sector code:.....

*The list of NACE sector codes is available at:*

[https://showvoc.op.europa.eu/#/datasets/ESTAT\\_Statistical\\_Classification\\_of\\_Economic\\_Activities\\_in\\_the\\_European\\_Community\\_Rev.\\_2.1.\\_%28NACE\\_2.1\\_%29/data](https://showvoc.op.europa.eu/#/datasets/ESTAT_Statistical_Classification_of_Economic_Activities_in_the_European_Community_Rev._2.1._%28NACE_2.1_%29/data)

Company size: number of employees below 250 YES [.....] NO [.....]

Company Legal Address:.....

Post Code.....

City.....

Region .....

Country:.....

Web site.....

Traineeship location (if different from the Company Legal Address)

Address:.....

Post Code.....

City.....

Region.....

Country.....

Name of supervisor (*this person is responsible for signing this Company Agreement, supervising the trainee during the traineeship and signing the Traineeship Certificate*): .....

Supervisor's e-mail: ..... Supervisor's phone number: .....

Name of traineeship mentor at the company (*the role of the mentor is to provide support, encouragement and information to the trainee on the life and experience relative to the enterprise (culture of the enterprise, informal codes and conducts, etc.)*): .....

Mentor's e-mail: ..... Mentor's phone number:.....

Name of Contact person: (*a person who can provide administrative information within the framework of Erasmus traineeships*) .....

Contact person's e-mail: ..... Contact person's phone number:.....

We hereby confirm that we are willing to host **Mr/Ms**..... student of the University of Bologna, as a trainee in our company, if he/she obtains an Erasmus+ status under the University of Bologna's *Erasmus+ Mobility for traineeship* scheme.

We intend to entrust him/her with tasks and responsibilities according to his/her studies, qualifications and knowledge and as specified in the traineeship offer above.

Date: .....Name of signee (supervisor): .....

Position of signee: .....

Signature: .....

**Company stamp:** compulsory whenever this form is not written on headed paper.

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## INSTRUCTION FOR FILLING OUT THE COMPANY AGREEMENT FORM

<sup>1</sup> This form consists of two parts:

The first part concerns the description of the traineeship activities; the second part concerns the collection of data regarding the host organisation.

**Every field must be filled in.**

Whenever you find notes at the foot of the page, you are kindly required to follow their instruction.

<sup>2</sup> The trainee may carry out the mobility as a student or as a recent graduate.

<sup>3</sup> When defining the start date of the traineeship and the duration, please consider that the activities must end within 31/07/2026 at the latest.

<sup>4</sup> Will be considered as a “**traineeship in digital skills**” any traineeship where trainees receive training and practice in at least one or more of the following activities: digital marketing (e.g. social media management, web analytics); digital graphical, mechanical or architectural design; development of apps, software, scripts, or websites; installation, maintenance and management of IT systems and networks; cybersecurity; data analytics, mining and visualisation; programming and training of robots and artificial intelligence applications. Generic customer support, order fulfilment, data entry or office tasks are not considered in this category.

<sup>5</sup> If relevant, please indicate also the title of the project within which the student will work with a brief description of it and the educational background necessary to the planned traineeship activities.

<sup>6</sup> Please indicate the added value of this experience, if it is carried out in a representation or public institution of the home country of the student. In particular, highlight the transnational aspects of this mobility.

<sup>7</sup> For information on how the personal data provided will be processed, please consult the annex “Personal data processing\_for host organisations”

<sup>8</sup> Please choose one of the following items:

- Accreditation, certification, or qualification body
- Counselling body
- European grouping of territorial cooperation
- Non-governmental organisation/association
- European or international public body
- Foundation
- Group of young people
- Higher education institution (tertiary level)
- Large enterprise
- Local Public body
- National Public body
- National Youth Council
- Organisation or association representing (parts of) the sport sector
- Other type of organisation
- Public service provider
- Regional Public body
- Research Institute/Centre
- School/Institute/Educational centre – Adult education
- School/Institute/Educational centre – General education (pre-primary level)
- School/Institute/Educational centre – General education (primary level)
- School/Institute/Educational centre – General education (secondary level)
- School/Institute/Educational centre – Vocational Training (secondary level)
- School/Institute/Educational centre – Vocational Training (tertiary level)
- Small and medium sized enterprise
- Social enterprise
- Social partner or other representative of working life (chambers of commerce, trade union, trade association)
- Sport club
- Sport federation
- Sport league
- Youth organisation