Ms/Mr/Dr (student)..............................
Department .....................................
University of Torino
Via ...........................................Torino (Italy)

Place, date.................................

Object: ERASMUS TRAINEESHIP PROGRAMME 2018/2019 – HOST INSTITUTION

Letter of commitment to host Ms/Mr/Dr................................................................. [name, surname] - Undergraduate/Post-graduate/PhD Student [specify the level]

With the present statement I, the undersigned [title, name, surname]........................................................ Position in the Institution............................................................
declare that the Institution .........................................................................................
Country (EU).................................................. Town....................................................
Type of Institution/legal status....................................................................................
[are not allowed EU Institutions or EU National Agencies: https://europa.eu/european-union/about-eu/institutions-bodies_en]

is interested in participating to the EU - Erasmus Traineeship call 2018/2019 in collaboration with
Prof............................................................ Department of .............................................. - University of
Torino (Sending Institution)

We commit ourselves to assume the role of Host Institution, sustaining the training period of

- [Ms/Mr/Dr., name, surname] ..........................................................................................
- ☐ Undergraduate – ☐ Post-graduate - ☐ PhD student
- in the field of..........................................................
- for a period of months .......... (☐ maximum or ☐ exact)
- Language skills required: language................................................. level.........certificate.............

The activity of the Trainee will be carried out under the tutoring of the staff of our Institution
and will be focused on [short list of activities]..........................................................................
..............................................................................................................................................

The Host Institution will provide the logistic support when needed and cooperate in the different
phases of the project implementation such as information, tutoring activities, monitoring and
evaluation.
In case of unexpected impossibility to host the Trainee, the Host Institution will promptly inform the Sending Institution.

The Sending Institution will cover the Erasmus Traineeship scholarship whose amount is determined by the UE National Agency Erasmus+ depending on the country of destination of the Trainee: [https://www.unito.it/internazionalita/studiare-e-lavorare-allestero/erasmus/erasmus-traineeship](https://www.unito.it/internazionalita/studiare-e-lavorare-allestero/erasmus/erasmus-traineeship)

It is understood that the fulfillment of additional terms and conditions required by the legislation of the Host institution’s country, if any, will be the responsibility of the Host Institution.

The Sending Institution will provide a liability insurance and an accident insurance to the Trainee (if not provided by the Hosting Institution): the accident insurance will cover accidents on the way to work and back from work – but will not cover accidents during travels made for work purposes. ([https://www.unito.it/universita-e-lavoro/tutela-e-assistenza/assicurazioni](https://www.unito.it/universita-e-lavoro/tutela-e-assistenza/assicurazioni)).

The described activities will be carried out according to the criteria of the European Quality Charter of Mobility.

The Host Institution will require - in addition to the Learning Agreement for Traineeship:

- Additional documents..................................................................................................signed by..................................................

- Communication/information concerning the Trainee..........................................................

Name, Surname..............................................Stamp - Signature..................................................

**NB: THE STAMP OR THE HEADED PAPER ARE MANDATORY**