

ERASMUS MUNDUS Action 2 Strand 1 Lot 11, EACEA/42/11

Grant Agreement 2013-2538 / 001-001 EM Action 2 Partnership

#

# WORK PLAN PROPOSAL (PhD, Post-Doc, Staff)

## Mobility information

## Applicant

|  |  |
| --- | --- |
| Surname (Family name) | Given name (First name) |
| Date of birth |  e-mail address  |

## Home institution

|  |
| --- |
| Home institution  |
| Current field of study  | Current level of study\*PhD [ ]  1 [ ]  2 [ ]  3  |
| Full Name of student advisor\*  | e-mail of student advisor\* |
| Department of student advisor\* | Position of student advisor\* |

\*Only for exchange PhD applicants

## Host institution

|  |
| --- |
| Host institution |
| Full Name of contact person  | e-mail of contact person |
| Department of contact person | Position of contact person |
| Date of arrival | Length of the mobility (months) |

## 2. Details of the proposed training/research/teaching plan

*Description of planned training / research / teaching activities (minimum 10 lines)*

|  |  |  |
| --- | --- | --- |
| **The applicant** | **Home institution (only for exchange mobility)** | **Host institution** |
|  | We confirm that the proposed work plan is approved and successful activity will be recognized at the Home University (if applicable). | We confirm that we have an interest for the proposed work plan under the condition of the selection of the applicant to the INTERWEAVE project. |
| (Name) | (Name) | (Name) |
| (Date) | (Date) | (Date) |
| (Signature) | (Signature and stamp) | (Signature and stamp) |