**WORK PLACEMENT AGREEMENT**

**Academic Year** Choose an item.

**Centria University of Applied Sciences**

Talonpojankatu 2

67100 Kokkola

Finland

called hereafter **"the institution"**, represented for the purposes of signature of this agreement by Peter Finell, International Relations Manager

of the one part, and

Click here to enter text.

Click here to enter text.

called hereafter **“the beneficiary”** of the other part,

**HAVE AGREED TO**

the **Conditions** and **Annexes** below:

**Annex I Training Agreement and Quality Commitment for student placements**

**Annex II General Conditions**

**Annex III Application for a Work Placement Grant**

**Annex IV Final Report for the Work Placement**

**Annex V Transcript of Work**

which form an integral part of this agreement ("the agreement").

**CONDITIONS**

**ARTICLE 1 – PURPOSE OF THE GRANT**

1.1 The institution will provide financial support to the beneficiary for undertaking a Work Placement.

1.2 The beneficiary accepts the grant and undertakes to carry out the Placement acting on his/her own responsibility.

1.3 The beneficiary hereby declares to have taken note of and accepted the terms and conditions set out in the present agreement. Any amendment or supplement to the agreement shall be done in writing.

**ARTICLE 2 - DURATION**

2.1 The agreement shall enter into force on the date when the last of the two parties signs.

2.2 The Placement shall start on Click here to enter a date. at the earliest and end on Click here to enter a date. at the latest.

**ARTICLE 3 – INSURANCE**

3.1 The travel insurance of the institution is provided by LähiTapiola and the insurance number is 353-3870661-S. The participant is responsible for familiarising himself/herself with the conditions for the insurance policy. The insurance provides health insurance coverage, liability coverage and accident insurance coverage to EU-citizens.

3.2 The participant who is not a citizen of the European Union is not covered by the insurance of the institution and is obligated to have a private insurance covering the required types specified in 3.3. A copy of the private insurance certificate shall be provided to the institution together with the Placement Agreement.

3.3 It is mandatory that the insurance used by a participant during traineeship under the Overseas Programme covers health insurance as well as liability insurance and accident insurance.

3.4 The institutions cannot be held liable for costs incurred by the beneficiary due to insufficient insurance.

**ARTICLE 4 - FINANCING THE MOBILITY PERIOD**

4.1 The final amount for the Placement shall be determined by multiplying the duration of the Placement in months by a rate of 470 EUR per month. The beneficiary must provide proof of the actual dates of start and end of the Placement.

**ARTICLE 5 – PAYMENT ARRANGEMENTS**

5.1 Within 45 days of the date of entry into force of the agreement, a financing payment representing 80% of the maximum grant amount.

5.2 If the payment under article 5.1 is lower than 100% of the maximum grant amount, the final report will be considered as the beneficiary's request for payment of the balance of the grant. The institution shall have 45 calendar days to make the balance payment or to issue a recovery order in case a reimbursement is due.

**ARTICLE 6 – FINAL REPORT**

6.1 The beneficiary shall submit the final report using the official forms at the latest 30 days after the end of the Placement.

**ARTICLE 7 - BANK ACCOUNT**

7.1 Payments shall be made to the beneficiary's bank account as indicated in the Application for a Placement Grant.

**ARTICLE 8 – LAW APPLICABLE AND COMPETENT COURT**

8.1 The grant is governed by the terms of the agreement, the Community rules applicable and, on a subsidiary basis, by the law of Finland relating to grants. The beneficiary may bring legal proceedings regarding decisions by the institution concerning the application of the provisions of the agreement and the arrangements for implementing it before the competent Court in accordance with the applicable national law.

**SIGNATURES**

For the beneficiary For the institution

Click here to enter text. **Peter Finell**

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Annex I**

##### TRAINING AGREEMENT AND QUALITY COMMITMENT

##### Academic Year Choose an item.

##### Subject Area: Click here to enter text.

##### Degree: Click here to enter text.

**Name of student:** Click here to enter text.

**Sending institution:** Centria University of Applied Sciences

**Country:**  Finland

**DETAILS OF THE PROPOSED TRAINING PROGRAMME ABROAD**

**Host organisation:** Click here to enter text.

**Start date:** Click here to enter a date.

**End date:** Click here to enter a date.

|  |
| --- |
| **Knowledge, skills and competence to be acquired** |
| Click here to enter text. |
| **Detailed programme of the training period** |
| Click here to enter text. |
| **Tasks of the trainee** |
| Click here to enter text. |
| **Monitoring and evaluation plan** |
| Click here to enter text. |

**COMMITMENT OF THE THREE PARTIES**

By signing this document the student, the sending institution and the host organisation confirm that they will abide by the principles of the Quality Commitment for Erasmus student placements set out in the document below.

|  |  |
| --- | --- |
| Student’s Signature | Date: |

#### **SENDING INSTITUTION**

|  |  |
| --- | --- |
| We confirm that the proposed training agreement for the work placement is approved. On satisfactory completion of the work placement the institution will award Click here to enter text. ECTS credits or will record the training period in the Diploma Supplement of the student. | |
| Academic Coordinator’s signature | Institutional Coordinator’s signature |
| Click here to enter text. | **Peter Finell**, International Relations Manager |
| Date: | Date: |

#### **HOST ORGANISATION**

|  |  |
| --- | --- |
| Coordinator’s signature | The student will receive financial support for his placement  Yes **🞏** No **🞏**  The student will receive a contribution in kind for his placement  Yes **🞏** No **🞏** |
| Date: |

**QUALITY COMMITMENT**

**For Student Placements**

**THE SENDING HIGHER EDUCATION INSTITUTION\* UNDERTAKES TO:**

Define the **learning outcomes** of the placement in terms of the knowledge, skills and competencies to be acquired.

Assist the student in **choosing** the appropriate host organisation, project duration and placement content to achieve these learning outcomes.

**Select** students on the basis of clearly defined and transparent criteria and procedures and sign a **placement contract** with the selected students.

**Prepare** students for the practical, professional and cultural life of the host country, in particular through language training tailored to meet their occupational needs.

Provide **logistical support** to students concerning travel arrangements, visa, accommodation, residence or work permits and social security cover and insurance.

Give **full recognition** to the student for satisfactory completed activities specified in the Training Agreement.

**Evaluate** with each student the personal and professional development achieved through participation in the Placement.

**THE SENDING INSTITUTION\* AND HOST ORGANISATION JOINTLY UNDERTAKE TO:**

Negotiate and agree a tailor-made **Training Agreement** (including the programme of the placement and the recognition arrangements) for each student and the adequate mentoring arrangements.

**Monitor** the progress of the placement and take appropriate action if required.

**THE HOST ORGANISATION UNDERTAKES TO:**

Assignto students **tasks and responsibilities** (as stipulated in the Training Agreement) to match their knowledge, skills, competencies and training objectives and ensure that appropriate equipment and support is available.

Draw **a contract or equivalent document** for the placement in accordance with the requirements of the national legislation.

**Appoint a mentor** to advise students, help them with their integration in the host environment and monitor their training progress.

Provide **practical support** if required, check appropriate insurance cover and facilitate understanding of the culture of the host country.

**THE STUDENT UNDERTAKES TO:**

Comply with all **arrangements** negotiated for his/her placement and to do his/her best to make the placement a success.

Abide by the **rules and regulations** of the host organisation, its normal working hours, code of conduct and rules of confidentiality.

**Communicate** with the sending institution about any problem or changes regarding the placement.

**Submit a report** in the specified format and any required supporting documents at the end of the placement.

\* In the event that the higher education institution is integrated in a consortium, its commitments may be shared with the co-ordinating organisation of the consortium

**Annex II**

**GENERAL CONDITIONS**

**Article 1: Liability**

Each party of this agreement shall exonerate the other from any civil liability for damages suffered by him or his staff as a result of performance of this agreement, provided such damages are not the result of serious and deliberate misconduct on the part of the other party or his staff.

**Article 2: Termination of the agreement**

In the event of failure by the beneficiary to perform any of the obligations arising from the agreement, and regardless of the consequences provided for under the applicable law, the institution is legally entitled to terminate or cancel the agreement without any further legal formality where no action is taken by the beneficiary within one month of receiving notification by registered letter.

If the beneficiary terminates the agreement before its agreement ends or if he/she fails to follow the agreement in accordance with the rules, he/she will have to refund the amount of the grant already paid.

In case of termination by the beneficiary due to "force majeure", i.e. an unforeseeable exceptional situation or event beyond the beneficiary's control and not attributable to error or negligence on his/her part, the beneficiary will be entitled to receive the amount of the grant corresponding to the actual time of the placement. Any remaining funds will have to be refunded.

**Article 3: Data Protection**

The beneficiary may, on written request, gain access to his personal data and correct any information that is inaccurate or incomplete. He/she should address any questions regarding the processing of his/her personal data to the sending institution. The participant may lodge a complaint against the processing of his personal data with the [national supervising body for data protection] with regard to the use of these data by the sending institution with regard to the use of the data.

**Annex III**

**WORK PLACEMENT - APPLICATION FOR A PLACEMENT GRANT**

**Academic Year** Choose an item.

The home institution will keep this form in its records. In normal circumstances the payment of the grant is not possible before this form has been signed. The general conditions of the grant are:

* The student has completed at least one year of higher education studies prior to the placement period.
* The placement period abroad lasts minimum 3 months, maximum 12 months.
* The home institution shall give full recognition of the placement completed abroad.

In case these conditions are not fulfilled, the grant may be fully or partly recovered.

**Name of Student:** Click here to enter text.

**Personal Identity Code:** Click here to enter text.

**Nationality:** Click here to enter text.

**Gender:** Choose an item.

**Address:** Click here to enter text.

**Email address (in use!): ­­­­­­­­­­­­­­­­­­­ ­**Click here to enter text.

**IBAN:** Click here to enter text.

**BIC:** Click here to enter text.

**Degree Programme:** Click here to enter text. **Full years of study prior to exchange:** Choose an item.

**Host Enterprise/organization:** Click here to enter text.

**Size of Host Enterprise/org.:** Choose an item.

**Economic sector of the host enterprise:** Choose an item. **Host Country:** Click here to enter text.

**Exchange Period:** Click here to enter a date. **to** Click here to enter a date.

**months of practical placement includes:** Choose an item.

**Possible recognition received abroad:** Choose an item.

**Previous exchange:** Choose an item.

I accept a grant of Click here to enter text. Euros and agree to the following conditions:

1. I will use the grant only to cover travel, subsistence, accommodation and language preparation expenses of the student exchange.
2. I will follow the approved Training Agreement.
3. If I cancel or interrupt the placement, I will refund the full grant or a part of it.
4. I will take out a necessary insurance policy.
5. After the placement I will submit a report of my placement period and a transcript of work to my home institution.
6. 80 percent of the grant will be paid to me before the start of my study period and the remaining 20 percent once I have submitted the final report and a transcript of work to my home institution.

I assure that I have not given any false information when applying for the grant.

**Place and Date Student’s Signature**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Annex IV**

**WORK PLACEMENT - Final report form**

***Narrative final report from the returning student from a placement period to the home higher education institution***

**1. Identification of the student**

**Your name (family, given):** Click here to enter text.

**Your gender:** Choose an item.

**Subject area of your degree/major:** Click here to enter text.

**Your email address:** Click here to enter text.

**I agree that my email address may be later used to contact me:** Choose an item.

**2. Study period and motivation**

**Name of host enterprise/organization:** Click here to enter text.

**Address** (street, city, country)Click here to enter text.

**Dates of work placement period abroad:** Click here to enter a date. **to** Click here to enter a date.

**In which year/at which level where you during your work placement abroad:**

Choose an item. Choose an item.

**Do you consider the work placement period to have been:** Choose an item.

**Which were the factors which motivated you to go abroad?**

Academic Choose an item.

Cultural Choose an item.

Live in a foreign country Choose an item.

Practice a foreign language Choose an item.

Friends living abroad Choose an item.

Career plans/enhance future employment prospects Choose an item.

European experience Choose an item.

Be independent/self-reliant Choose an item.

Other (please specify) Click here to enter text.

**3. Information and support**

**How did you find the host enterprise/organisation?**

Home institution Choose an item.

Host institution Choose an item.

Other students Choose an item.

Former participants Choose an item.

Internet Choose an item.

Other (please specify) Click here to enter text.

**Do you consider it difficult find a host enterprise/organisation?** Choose an item.

Scale 1-5: 1=not at all, 5=very much

**On your arrival at the host enterprise/organisation, were you offered:**

A welcome event Choose an item.

An information session Choose an item.

Other, please specify Choose an item.

**Did you receive adequate support from your host enterprise/organization/home institution/intermediary institution before and during your Erasmus placement period?**

Scale 1-5: 1=poor/negative, 5=excellent

Host enterprise/organisation: Choose an item.

Home institution: Choose an item.

Intermediary institution: Choose an item.

**How do you consider your degree of integration with local employees in the host enterprise/organisation?** Choose an item.

Scale 1-5: 1=poor/negative, 5=excellent

**4. Accommodation and infrastructure**

**Your type of accommodation at host institution:**

Private housing Choose an item.

Accommodation provided by the enterprise Choose an item.

University accommodation Choose an item.

Apartment or house together with other students Choose an item.

Other (please specify) Click here to enter text.

**How did you find your accommodation?**

University service Choose an item.

Friends/family Choose an item.

Private market Choose an item.

Internet Choose an item.

Other (please specify) Click here to enter text.

**5. Linguistic preparation**

**Language(s) of work in the host enterprise/organisation:** Click here to enter text.

**Was language preparation provided?** Choose an item.

**Duration of language training**

Total number of weeks Click here to enter text.

Hours per week Click here to enter text.

**How would you rate your competency in the language of your host country?**

Before the Erasmus study period: Choose an item.

After the Erasmus study period: Choose an item.

Scale 1-5: 1= no knowledge, 5= very good

**6. Recognition**

**Did you and your home and host enterprise/organisation sign a Training Agreement prior to the commencement of your placement period?** Choose an item.

**Will you gain academic recognition for your placement abroad?** Choose an item.

**If yes, what kind of recognition?** Choose an item.

**Will you get credits for completing language courses?** Choose an item.

**7. Costs**

**How much was your grant per month (EUR):** Click here to enter text.

**Average costs per month during your period abroad (EUR):** Click here to enter text.

**To what extent did the grant cover your needs?** Choose an item.

Scale 1-5: 1=not at all, 5=fully

**When did you receive your grant (multiple answers are possible)?**

Prior to your stay Choose an item.

At the beginning of your stay Choose an item.

In the middle of your stay Choose an item.

At the end of your stay Choose an item.

After your stay Choose an item.

**Did you have other sources of funding?**

State grant Choose an item.

State loan Choose an item.

Private grant(s) Choose an item.

Private loan Choose an item.

Family Choose an item.

Own savings Choose an item.

Other sources (please specify) Click here to enter text.

**Amount of the other sources in total per month (EUR):** Click here to enter text.

**8. Your personal experience – overall evaluation of placement period**

**Judgement of professional outcome of the placement:** Choose an item.

Scale 1-5: 1=poor/negative, 5=excellent

**Judgement of personal outcome of the period:** Choose an item.

Scale 1-5: 1=poor/negative, 5=excellent

**Did you encounter any serious problems during the period?** Choose an item.

**If yes, please specify:** Click here to enter text.

**Which aspects of the period did you particularly appreciate?**

Academic Choose an item.

Gaining relevant work experience Choose an item.

Acquiring new vocational knowledge and skills Choose an item.

Cultural Choose an item.

Live in a foreign country Choose an item.

Practice a foreign language Choose an item.

Friends living abroad Choose an item.

Career plans/enhance future employment prospects Choose an item.

European experience Choose an item.

Be independent/self-reliant Choose an item.

Other (please specify): Click here to enter text.

**Did you experience new techniques, technologies and methods?** Choose an item.

**Are you more likely to consider working in another country at the end of your placement as a result of your experience?** Choose an item.

**Do you think the placement will help you in your career?** Choose an item.

Scale 1-5: 1=not at all, 5=very much

**Do you think the placement will help you in finding a job?** Choose an item.

Scale 1-5: 1=not at all, 5=very much

**Overall evaluation of your placement:** Choose an item.

Scale 1-5: 1=poor/negative, 5=excellent

**Are you willing to help outgoing or incoming students with your experience?**

Choose an item.

**Recommendations and ideas to other students concerning information, application procedures etc.:**

Click here to enter text.

***Please return this report in an electronic format to your home institution at the end of your study period abroad.***

**Annex V**

**To be completed by the employer organisation**

**Transcript of Work**

**It is hereby certified that the student**

Name of student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Born on ­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_

Home country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**has carried out an practical placement at our organization**

Name of organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_

Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size of the enterprise (S = Small (<=50 staff) \_\_\_\_\_

M = Medium (51-250 staff) \_\_\_\_\_

L = Large (>250 staff) \_\_\_\_\_

Placement Sector \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The placement took place from** \_\_\_\_\_ / \_\_\_\_\_ / 20 \_\_\_\_\_ **to** \_\_\_\_\_ / \_\_\_\_\_ /20\_\_\_\_\_

**During the placement, the student had following tasks:**

|  |
| --- |
|  |

Date and Place ­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature ­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the signatory \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address ­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Annex VI**

**WORK PLACEMENT – TERMINATION OF WORK PLACEMENT**

**Academic Year** Choose an item.

**Name of Student:** Click here to enter text.

**Personal Identity Code:** Click here to enter text.

**Nationality:** Click here to enter text.

**Gender:** Choose an item.

**Address:** Click here to enter text.

**Email address (in use!): ­­­­­­­­­­­­­­­­­­­ ­**Click here to enter text.

**Home Unit at Centria:** Choose an item.

**Degree Programme:** Click here to enter text.

**Receiving Organisation:** Click here to enter text.

**Host Country:** Click here to enter text.

**Termination Reason:** Choose an item.

**I accept that I may be required to repay the entire placement grant, or part thereof.** Choose an item.

**Termination Date:** Click here to enter a date.

**Exchange Period:** Click here to enter a date. **to** Click here to enter a date.

**Attachments:**

Provide the following attachments with your termination notice:

1. Personal letter stating your reason for terminating the work placement. Please be specific!
2. If the termination is due to medical reasons, provide a statement from a doctor stating that you cannot continue your work placement due to medical reasons.
3. Any other documentation that is relevant for the termination of your work placement.

**Place and Date Student’s Signature**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Send all the documentation electronically to Peter Finell ([peter.finell@centria.fi](mailto:peter.finell@centria.fi)) and a copy to the International Coordinator in your unit. IMPORTANT! Send the original documentation to:

**Centria University of Applied Sciences**

**Centria International**

Talonpojankatu 2

67100 Kokkola

FINLAND

A decision regarding repayment of the placement grant will be made within three months of receiving all the necessary documentation. If you are required to repay the entire placement grant, or part thereof, a bill will also be sent to you.