

January 2017

SEMP – Swiss-European Mobility Programme (Erasmus) Teaching programme for Teaching Staff Mobility

Please send the completed “Teaching programme” together with your application form via postal mail to the Mobility Office.

Teaching Staff Member	
Name, First Name	
Duration (from...to...)	

Home institution	
Home University	
Erasmus ID-Code	
Department	
Name of contact person	
Position of contact person	

Host institution	
Host University	
Erasmus ID-Code	
Department	
Name of contact person	
Position of contact person	

Subject area	
Level (Bachelor Year x, Master Year x, Doctoral Year x)	
Number of students at the host institution benefiting from the teaching programme	
Number of teaching hours	

Objectives of the mobility

Added value of the mobility (both for the host institution and for the teacher)

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Content of the teaching programme

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Expected results (not limited to the number of students concerned)

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Signatures

Teacher		
	Place/Date	Teacher's signature
Home institution		
	Place/Date	Signature Director of Department (or proxy)
Host institution		
	Place/Date	Signature Director of Department (or proxy)