Mobility and Post-mobility Scientific Project and Agreement

EMINENCE II Doctorate Scholarships

This application document, mandatory for PhD candidates is a proposal agreed by the candidate and Universities involved in the mobility (Home and Host Universities), certifying the interest of the parties to implement the activity.

This document will be used before, during and after mobility:
1) in the application phase it must be uploaded with the application (section I - Mobility and post-mobility project proposal must be filled in and duly signed - signatures must be obtained in scan 1):
2) during the mobility it should be updated to keep track of changes in the activity (section II - Final mobility agreement to be signed before arrival and section III - changes to originally proposed research / training / teaching plan – filled in if applicable during the mobility);
3) home university will use it in conjunction with the PhD Student Report and PhD Student’s Supervisor Assessment Form (periodical and final) for the recognition of the mobility period abroad.

Name: ___________________________ Family name: ___________________________ Second/middle name (optional): ___________________________

SECTION I. Mobility and Post-Mobility Project - proposal to be agreed by home and host university and applicant at the time of application

1. Identification of mobility

Please give the details of your desired mobility, according to prior, preliminary agreement with host university:

<table>
<thead>
<tr>
<th>Name of the Host University</th>
<th>(one of EMINENCE II Partner universities)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of faculty/department/unit to which you will be attached for your doctoral thesis</td>
<td></td>
</tr>
<tr>
<td>Name and position of PhD thesis supervisor at Host University</td>
<td></td>
</tr>
<tr>
<td>Phone and e-mail of PhD thesis supervisor</td>
<td></td>
</tr>
</tbody>
</table>

Please give the details of your current doctoral studies:

<table>
<thead>
<tr>
<th>Name of the Home University</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of faculty/department/other unit to which you belong, where you have started your doctoral studies:</td>
<td></td>
</tr>
<tr>
<td>Name of head of this unit</td>
<td></td>
</tr>
<tr>
<td>Name of academic supervisor of your PhD studies/thesis in the university of origin (home university)</td>
<td></td>
</tr>
<tr>
<td>Phone and e-mail of PhD thesis supervisor</td>
<td></td>
</tr>
<tr>
<td>Topic/theme of your PhD studies/thesis</td>
<td></td>
</tr>
</tbody>
</table>

2. Mobility project proposal

1. Present the subject of your thesis and the scientific project that you want to carry out in the host university. This project must suit to interest of hosting faculty/department/unit research interest and expertise (max. 20 lines)

2. Define in which manner this mobility is useful and relevant for your thesis and research. Define synthetically (maximum 20 lines) all the valuation elements which will allow us to appreciate the interest and the importance of this mobility for your research project (in an academic and/or professional point of view). This information is complementary to the documents you will add to your file (CV, academic records)

3. Post-mobility project

Describe how you will share/introduce/implement your knowledge, skills, methods, ideas, solutions gained during your mobility with/to your home university/its scientific community after return - please give concrete actions, other persons involved etc. (max. 20 lines).

4. Other complementary information supporting your application

Add any other information that can give advantage to your application

5. Signatures:

HOME UNIVERSITY

We confirm that the proposed research/study proposal is approved and will be recognized at our university once the student returns from his/her mobility.

Academic – Faculty/Department Level (head of unit) | PhD supervisor at Home University (Professor)
Name: ___________________________ | Name: ___________________________
Signature: ___________________________ | Signature: ___________________________
Date: ___________________________ | Date: ___________________________

HOST UNIVERSITY

We confirm that the proposed research / study proposal can be carried out at our university and relevant program/courses/modules will be offered to the student.

Academic – Faculty/Department Level | EMINENCE II Local coordinator at Host University
Name: ___________________________ | Name: ___________________________
Signature: ___________________________ | Signature: ___________________________
Date: ___________________________ | Date: ___________________________
SECTION II. PhD mobility Agreement – final program/workplan to be agreed by home and host university and selected beneficiary BEFORE arrival

STUDY PERIOD: From __ __ / __ __ / __ __ __ __ To __ __ / __ __ / __ __ __ __

FIELD OF STUDY: …………………

1. Identification of mobility

<table>
<thead>
<tr>
<th>Name of the Host University</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of faculty/department/unit</td>
</tr>
<tr>
<td>Name and position of PhD thesis supervisor at Host University</td>
</tr>
<tr>
<td>Phone and e-mail of PhD thesis supervisor</td>
</tr>
</tbody>
</table>

DETAILS OF THE DOCTORAL STUDY/RESEARCH PROGRAMME/WORKPLAN

If necessary, please continue on a separate sheet

Student’s (Beneficiary’s) Signature ……………… Date: ………………………

HOME UNIVERSITY
We confirm that the proposed research/study proposal is approved and will be recognized at our university once the student returns from his/her mobility.

Academic – Faculty/Department Level (head of unit) PhD supervisor at Home University (Professor)
Name …………………………………………………. Name: ………………………………………………….
Signature ………………………………………………… Signature …………………………………………………
Date: __ __ / __ __ / __ __ __ __ Date: __ __ / __ __ / __ __ __ __

HOST UNIVERSITY
We confirm that the proposed research/study proposal can be carried out at our university and relevant program/courses/modules will be offered to the student.

Academic – Faculty/Department Level EMINENCE II Local coordinator at Host University
Name …………………………………………………. Name: ………………………………………………….
Signature ………………………………………………… Signature …………………………………………………
Date: __ __ / __ __ / __ __ __ __ Date: __ __ / __ __ / __ __ __ __
SECTION III - changes to originally proposed research / training / teaching plan to be agreed when necessary

If necessary, please continue on a separate sheet

Student’s (Beneficiary’s) Signature ………………… Date: ……………………………

HOME UNIVERSITY
We confirm that the proposed research/study proposal is approved and will be recognized at our university once the student returns from his/her mobility.

Academic – Faculty/Department Level (head of unit) 
Name ……………………………………………
Signature ……………………………………….. 
Date: __ __ / __ __ / __ __ __ __

PhD supervisor at Home University (Professor)
Name: ……………………………………………
Signature ……………………………………….. 
Date: __ __ / __ __ / __ __ __ __

HOST UNIVERSITY
We confirm that the proposed research / study proposal can be carried out at our university and relevant program/ courses/modules will be offered to the student.

Academic – Faculty/Department Level 
Name ……………………………………………
Signature ……………………………………….. 
Date: __ __ / __ __ / __ __ __ __

EMINENCE II Local coordinator at Host University
Name: ……………………………………………
Signature ……………………………………….. 
Date: __ __ / __ __ / __ __ __ __