



Politecnico  
di Torino

**PNRR M4 C1 INV.3.4 SUB-INV.T4**

**INIZIATIVE EDUCATIVE TRANSANZIONALI – TNE D.D. n. 167 del 03/10/2023 Mobilità individuale nell'istruzione superiore (TNE Studio)**

**TNE project:**

**LEARNING AGREEMENT**

a completamento della candidatura "Progetto PNRR-TNE" nell'ambito del Bando di Concorso per Mobilità Internazionale studentesca (Bando Unico) a.a. 2025/2026

Family name			
Given name			
PoliTO student n.		Nationality	
Level enrolled	<input type="checkbox"/> Doctoral or equivalent third cycle (EQF 8)		
E-mail		Phone	

**Sending Institution**

Name	Politecnico di Torino		
Address	Corso Duca degli Abruzzi 24, 10129 Torino		
Country	Italy		
Department/Unit			
Responsible person <sup>1</sup> :			
Name		Position	
E-mail		Phone	
Contact for administration <sup>2</sup> :			
Office	Ufficio Mobilità Internazionale		
Name		Position	
E-mail	extraue@polito.it	Phone	

**Receiving Institution**

Name			
Address			
Country			
Department/Unit			
Responsible person <sup>1</sup> :			
Name		Position	
E-mail		Phone	
Contact for administration <sup>2</sup> :			
Office			
Name		Position	
E-mail		Phone	

<sup>1</sup> An academic who has the authority to approve the Learning Agreement and to guarantee recognition of the activity.

<sup>2</sup> The person in the international office or other administration office in charge of international mobility.

**Planned period of activity**

First day of activity			
Last day of activity			
Duration: number of months		and extra days	

Fill in the dates and duration of the activity not including travel days, i.e. the date of arrival at the receiving university, the date of departure from it and the corresponding duration. Duration of activity must be between 2 and 6 months. Activity must be continuous and suspension periods are not allowed. Weekends and other festivities will be counted for the activity duration.

**Proposed mobility activity**

<b>Description of planned study / research activities with reference to the goals of the TNE project</b>

By signing<sup>3</sup> this document, the three parties approve the proposed Learning Agreement.

<b>The student</b> Name: Signature: _____ Date: _____
<b>The sending institution</b> Name of the responsible person <sup>4</sup> : Signature: _____ Date: _____
<b>The receiving institution</b> Name of the responsible person <sup>4</sup> : Signature: _____ Date: _____

<sup>3</sup> The agreement must be signed by the three parties in this order: 1. Student, 2. Sending institution, 3. Receiving Institution. Circulating papers with original signatures is not compulsory. Scanned copies of signatures or digital signatures may be accepted, depending on the national legislation.

<sup>4</sup> Responsible person detailed on page 1