**ERASMUS – Intensive Programme – project Nr**

**AGREEMENT for the academic year/s**

**Between**

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| **Co-ordinating institution**  (name and ERASMUS ID code of the institution) |  |
| **Name of Head of Institution** (legal representative who signs the partnership agreement) |  |
| **Project co-ordinator**  (name, address, phone, fax, E-mail) |  |

**And**

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| **Partner institution**  (name and ERASMUS ID code of the institution) |  |
| **Name of Head of Institution** (legal representative who signs the partnership agreement) |  |
| **Project co-ordinator**  (name, address, phone, fax, E-mail) |  |

The above parties agree to co-operate in the Lifelong Learning Programme (LLP), sectoral programme ERASMUS, IP project indicated below. Both parties agree to abide by the principles and conditions set out in the EU’s LLP Guidelines for Applicants, the ERASMUS application forms for the academic year/s and, if the application is successful, the financial agreement. The parties of this agreement undertake to abide by the agreed terms of this co-operation agreement:

* participation in the IP of  teachers and  students (subject to the financial agreement between the co-ordinating HEI and the Agency for mobility and EU programmes, Croatian NA) following the modalities as specified in the work plan for each of the next academic year/s of the project.
* each partner institution contributes with annually EUR to the overall IP budget amounting to yearly app. EUR
* the Intensive Programme and its preparatory phases have to be recognised as part of the study program of the participating students( ECTS credits)

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| Original project title (maximum eight words) | ISCED code(s) |
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**Signatures of the legal representatives/Heads of institutions:**

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| Name of the **Co-ordinating** institution:    Name and position of the Head of Institution (legal representative):    Signature and stamp:  Date: | Name of the **partner** institution:    Name and position of the Head of Institution (legal representative):    Signature and stamp:  Date: |