

## MOBILITY DISSEMINATION ACTIVITIES

Name of candidate	
Academic title	
Position	
Contact details in the Sending / Home Institution (email, phone)	

The Receiving / Host institution	
Department	
Name of candidate	
Contact details in the Receiving / Host institution (email, phone)	
Duration of mobility: number of working days (excluding travel day)	
Agreed mobility period	

Overall objectives of mobility		
Content of the teaching programme		
Activity plan according to working days *	day 1	
	day 2	
	day 3	

*\* insert the number of days as needed; travel days are excluded from the Activity Plan*

Expected outcomes/deliverables	
Assessment of the contribution to the teaching activities / professional activities at the Faculty of Business Economics and Entrepreneurship (usefulness for further work)	
Dissemination Erasmus mobility experiences after returning to the Faculty for Business Economics and Entrepreneurship	

**Date**

**Candidate's Signature**