



Erasmus Individual STT Mobility for Training

Training Activity Report

Academic year: ____/____

Host Institution: University of Catania (UNICT)

Erasmus ID code: I CATANIA01

Hosting structure at UNICT: _____

Contact person at UNICT: _____

Incoming visitors Surname and Name: _____

Home Institution: _____

Erasmus ID code: _____

Department or other structures: _____

Subject Area: _____

Number of Training hours: _____

Duration: _____ days from _____ to _____

Objective of the mobility _____

Content of the training programme: _____

Obtained results: _____

Contact Erasmus / International Departmental Coordinator

Surname and Name.....

Signature:

Date: