

Erasmus plus - WORK PLAN

SEMESTER/ACADEMIC YEAR 2023/2024 –TOPIC: STT
PERIOD OF STAY (in days/months):7 days.....

Name of Grantee:Country: ...**Tunisia**
Sending institution:**Gabes University**.....

DETAILS OF THE PROPOSED RESEARCH AND TEACHING PROGRAMME ABROAD

Receiving institution:**Almeria University**..... Country:**Spain**....

Activities planned during stay at the host institution

Our work is organized according to the following plan:

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Grantee's signature: **Date:**

HOME INSTITUTION

We confirm that this proposed programme of activities has been approved.

Signature of the institutional supervisor:

Name: **Date:**

Function:

HOST INSTITUTION

We confirm that this proposed programme of activities has been approved.

Signature of the institutional supervisor:

Name: **Date:**

Function:

Signature of the MIC coordinator:.....

Name: **Date:**