**Anexo VII**

**Plan de Actividades - Doctorandos**

**Personal Details / Datos personales**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name/Nombre** |  | **Passport no.** |  |
| **Surname/Apellidos** |  |
| **Date of Birth/Fecha de Nacimiento** |  | **Gender/Género** |  |
| **Nationality/Nacionalidad** |  | **Telephone/Teléfono** |  |
| **E-mail/Correo Electrónico** |  |

|  |  |
| --- | --- |
| **Institution Name/Nombre de la institución** | **UNIVERSIDAD AUTÓNOMA DE MADRID** |
| **Faculty UAM/Facultad UAM** |  |
| **Phd Program / Programa Doctorado UAM /**  |  |

|  |  |
| --- | --- |
| **Academic contact Person / Contacto académico UAM** (Tutor / Director de tesis)\* |  |
| **E-mail/Correo Electrónico** |  |

**Receiving Institution / Institución de Acogida**

|  |  |
| --- | --- |
| **Institution Name/Nombre de la institución** |  |
| **Faculty/Facultad** |  |
| **Address/Dirección** |  | **Country /País** |  |

|  |  |
| --- | --- |
| **Contact Person/Persona de Contacto\***(Supervisor académico en destino) |  |
| **E-mail/Correo Electrónico** |  |

#### **I. PROPOSED MOBILITY PROGRAMME / PROPUESTA DE MOVILIDAD**

Planned period of the mobility / Fechas previstas de la movilidad

|  |  |  |  |
| --- | --- | --- | --- |
| **From/De** *(day/month/year)* |  | **To/A** *(day/month/year)* |  |

**Language Skills / Competencia Linguística**[[1]](#footnote-1)

|  |  |
| --- | --- |
| **Language / Idioma** |  |
| **Level / Nivel** | *Level that the student has or agrees to acquire by the start of the study period**None* ☐ *A1* ☐ *A2* ☐ *B1* ☐ *B2* ☐ *C1* ☐ *C2* ☐ *Native speaker* ☐ |

|  |  |
| --- | --- |
| **Language / Idioma** |  |
| **Level / Nivel** | *Level that the student has or agrees to acquire by the start of the study period**None* ☐ *A1* ☐ *A2* ☐ *B1* ☐ *B2* ☐ *C1* ☐ *C2* ☐ *Native speaker* ☐ |

|  |  |
| --- | --- |
| **Language / Idioma** |  |
| **Level / Nivel** | *Level that the student has or agrees to acquire by the start of the study period**None* ☐ *A1* ☐ *A2* ☐ *B1* ☐ *B2* ☐ *C1* ☐ *C2* ☐ *Native speaker* ☐ |

**Goals of the mobility / Objetivos de la movilidad**

|  |
| --- |
| **Overall goals of the mobility / Objetivos generales de la movilidad** |
| *(main goals of the mobility)*  |

|  |
| --- |
| **Added Value / Valor añadido de la movilidad** |
| *(within the context of modernization and internationalization strategies of the institutions involved)* |

|  |
| --- |
| **Foreseen activity / Actividades previstas** |
| *(Activities carried out during the mobility)* |

|  |
| --- |
| **Expected impact / Resultados e impacto previsto** |
| *(i.e. Skills and capabilities development, improvement of competences, professional development, etc.)* |

**II. APPROVAL OF THE PARTIES / APROBACIÓN DE LAS PARTES[[2]](#footnote-2)**

By signing this document, the sending institution and the receiving institution confirm that they approve the proposed mobility.

|  |
| --- |
| **Applicant /Solicitante**  |
| **Full Name / Nombre Completo** |  | **Date / Fecha** |  |
| **Signature / Firma** |

|  |
| --- |
| **Sending Institution / Insitución de origen (tutor o director de tesis)\*** |
| **Organization Name / Nombre la Institución** |  |
| **Person Responsible / Nombre del Responsable\*** |  |
| **Position / Cargo** |  | **Date / Fecha** |  |
| **Signature / Firma** |

|  |
| --- |
| **Recieving Institution (Academic supervisor at host institution)/ Insitución de acogida (supervisor académico en universidad de acogida)\*** |
| **Organization Name / Nombre la Institución** |  |
| **Person Responsible / Nombre del Responsable\*** |  |
| **Position / Cargo** |  | **Date / Fecha** |  |
| **Signature / Firma** |

1. Level of language competence according to the European Language Levels (CEFR) <https://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr> [↑](#footnote-ref-1)
2. Se admiten firmas escaneadas / Scanned signatures are accepted [↑](#footnote-ref-2)