



ERASMUS PROGRAMME

STAFF MOBILITY – STAFF TRAINING

Work plan

Personal details	
Name of the staff member	
Position	
E-mail	
Phone	

The home institution	
Name and address of home institution	Visoka zdravstvena šola v Celju (College of nursing in Celje) Mariborska cesta 7 3000 Celje SLOVENIA
Erasmus ID code of home institution	SI CELJE08
Department	
Contact person from the home institution (name, position, e-mail, phone)	

The host institution	
Name and Address of the host institution	
Erasmus ID code of host institution	
Department	
Contact person from the host institution (name, position, e-mail, phone)	

Placement details	
Subject area	
Proposed duration of the placement	

Work plan	
Overall aim and objectives of the mobility	
Activities to be carried out, and, if possible, the programme for the period	
Added value of the mobility (both for the host institution and for the staff)	
Expected results	

Signature staff member	
Signature:	Date:

Approval home institution - Visoka zdravstvena šola v Celju (College of nursing in Celje)	
The above work plan has been approved.	Name: Position: Signature: Date: Stamp: