**PIRI REIS UNIVERSITY**

**ERASMUS TEACHING PROGRAM**

**Teaching Agreement 2013/2014**

**Name of teacher:**

**E-mail:**

**Department:**

**Sending Institution: PİRİ REİS UNIVERSITY**

**Erasmus Code: TR ISTANBU 37**

**Erasmus Contact Person:**

**Host Institution:**

**Erasmus Code:**

**Erasmus contact person:**

**Subject area:**

**Level of students: Bachelor 🞎 Master 🞎 Doctoral 🞎**

**Duration: ... Days Arrival Date: dd.mm.yy Departure Date: dd.mm.yyyy**

**Number of students at the host institution benefiting from the teaching programme:**

**Number of teaching hours (minimum of 5 hours):**

**Objectives of the mobility:**

**Content of the teaching programme:**

**Teaching program:**

**Day 1:**

**Day 2:**

**Day 3:**

**Day 4:**

**Added value of the mobility /expected results (for host institution and teacher):**

|  |  |
| --- | --- |
| **NAME OF TEACHER:**  | **Date and signature:** |

**SENDING INSTITUTION**

**We confirm that this proposed teaching programme is approved.**

**Date: ………………… Signature ………………………………………………………..**

**RECEIVING INSTITUTION**

**We confirm that this proposed teaching programme is approved.**

**Date: ………………… Signature ………………………………….……………..…………………………………..**