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| --- | --- | --- | --- | --- | --- | --- |
| **Trainee** | **Last name(s)** | **First name(s)** | **Date of birth** | **Nationality** | **PhD cycle** | **PhD course** |
|  |  |  |  |  | Structural Biology |
| **Sending Institution** | **Name** | **Department** | **Address** | **Country** | **Supervisor name;****e-mail** |
| University of Florence | Department of Chemistry“Ugo Schiff” | Via della Lastruccia 3 50019 Sesto Fiorentino (FI)  | Italy |  |
| **Receiving Organisation/Enterprise** | **Name** | **Department** | **Address** | **Country** | **Supervisor name;****e-mail** |
|  |  |  |  |  |
| **Before the mobility** |
|  | ***Traineeship Programme at the Receiving Organisation/Enterprise*** |
| **Planned period of the mobility:** from [month/year] …………………… to [month/year] …………………. |
| **Traineeship title:**  |
| **Programme of the traineeship:**  |
|  |  |  |  |  |  |  |  |  |

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| ***Receiving Organisation/Enterprise*** |
| The Receiving Organisation/Enterprise will provide financial support to the trainee for the traineeship: Yes ☐ No ☐ | If yes, amount (EUR/month): ……….. |
| The Receiving Organisation/Enterprise will provide appropriate support and equipment to the trainee.  |
| The Sending Institution will provide an accident insurance to the trainee. The accident insurance covers activities related to the institutional work only, and not in private life.By signing this document, the trainee, the Sending Institution and the Receiving Organisation/Enterprise confirm that they approve the PhD Mobility Agreement and that they will comply with all the arrangements agreed by all parties. The trainee and Receiving Organisation/Enterprise will communicate to the Sending Institution any problem or changes regarding the traineeship period.CONFIDENTIALITY AND OWNERSHIP OF RESEARCH The hosted PhD student is subjected to confidentiality. He/she will have to respect the confidentiality of all documents and any other privileged information of scientific nature to which he will have access during his internship. The same rules apply to all the trade secrets of equipment, processes and inventions, susceptible or not to be patentable. In case the results of the work made by the PhD student in the host research structure led to inventive activity and are likely to be assessed, the host organization and foreign teams agree to sign a complementary specific agreement.DATA PROCESSING In accordance with the provisions of Article 13 of EU Regulation 2016/679 on the protection of individuals with regard to the processing of personal data, the Parties hereby declare that they are mutually informed that the personal data collected in connection with this agreement will be processed by each Party for the exclusive purpose of executing the same and failure to provide such data will not allow the achievement of such objective. The Data Controllers are the Parties as identified in the epigraph, who can be contacted at the addresses indicated therein. The data collected will be processed, by computer or manually, by personnel authorized to the treatment by each owner. They may also be processed by third parties expressly identified as responsible for processing. The data will be kept for the period of the agreement; subsequent processing will be carried out for archiving purposes only. The data will not be communicated to third parties, nor disseminated except in cases specifically provided for by national or European Union law. The parties declare that they mutually guarantee each other the right of access, rectification, deletion and restriction of data, as well as the right to object to the processing, in the manner and within the limits provided by the European Regulations; the exercise of these rights is permitted, at the Receiving Organisation/Enterprise, by contacting the Data Protection Officer at the e-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_ and for the University by contacting privacy@unifi.it. The parties also mutually guarantee the right to lodge a complaint with the Data Protection Authority. |
| **Commitment** | **Name** | **Email** | **Date** | **Signature** |
| Trainee |  |  |  |  |
| Supervisor at the Sending Institution |  |  |  |  |
| Supervisor at the Receiving Institution |  |  |  |  |
| Coordinator of the PhD course |  |  |  |  |

**After the Mobility, to be produced on headed paper of the** **Receiving Organisation/Enterprise**

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| ***Traineeship Certificate by the Receiving Organisation/Enterprise*** |
| **Name of the trainee:**  |
| **Supervisor at the Receiving Organisation/Enterprise:** |
| **Name of the Receiving Organisation/Enterprise:**  |
| **Department of the Receiving Organisation/Enterprise:**  |
| **Address of the Receiving Organisation/Enterprise:**  |
| **Start date and end date of traineeship:** from [day/month/year] ……………………. to [day/month/year] ……………………… |
| **Traineeship title:**  |
| **Programme of the traineeship period, tasks carried out by the trainee, competences acquired:**  |
| **Date:** |
| **Name and signature of the Supervisor at the Receiving Organisation/Enterprise:** |