MOBILITY REPORT

To be filled in English or Spanish

Name and Surname:

Name of your home University: ____________________________ Country: ____________________________

Name of the host University: ____________________________ Country: ____________________________

Host department: ____________________________

Period of the stay: (day/month/year)

Please, fill this assessment report form regarding your participation in the Programme, using a scale from 1 to 4:

1 – Inadequate; 2 – Sufficient; 3 – Good; 4 – Very good

1. Assistance for management of mobility

2. Reception and stay

3. Organisation of the training

4. Exchange of experiences

5. Communication with the staff at the host university

6. Acquiring new skills

7. Briefly report on the activities carried out at the host university and how you benefited from the experience.
7. Impressions on the programme: Positive aspects and aspects to be improved.

8. Would you like to repeat the experience?

Date:  

Signature:

A scanned copy of this document must be send to the Compostela Group of Universities (grupo.compostela@usc.es) once the mobility completed, together with the documentation indicated in point 5.1 of the present call of the programme.