To be completed by the beneficiary of mobility

Name and surname:

Name of home University: Country:

Name of host University: Country:

Code and name of host department:

Length of mobility: From (day/month/year) to (day/month/year)

Please, complete 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

LOGISTICS AND MANAGEMENT OF MOBILITY

1. Support to manage the mobility before the stay

2. Reception and stay

3. Integrate the beneficiary into the usual work dynamic

4. Monitoring of programmed tasks during mobility

5. Support to face difficulties during the stay

6. Definition of tasks, schedules and activities during the stay

BEST PRACTICES

7. Exchange of labour experiences

8. Acquisition of new skills
9. Acquisition of new tools and working methodologies

10. Establishment and strengthening of contacts

11. Opportunities for development of agreements and initiatives

12. Growth of professional career

13. Learning of new culture and working language

OTHER ASSESSMENTS

14. Please, list the carried out activities at the host department and explain how they contributed to your experience (maximum 250 characters)

15. Positive aspects and aspects to be improved in your mobility (maximum 250 characters)
16. Positive aspects and aspects to be improved in the STELLA for Staff programme (maximum 250 characters)

17. Would you repeat the experience? Explain the reasons

Date: 

Signature: 

A scanned copy of this form should be sent to the Compostela Group of Universities (grupo.compostela@usc.es) at the end of the mobility, together with the documentation indicated in point 5.1 of the regulations of this edition.