**Home institution:**
Name of teacher: 

Sending institution, department:
Hochschule für Musik, Theater und Medien Hannover

Country: Germany

ERASMUS-CODE: D HANNOVE04 EUC-No.: 29957

Name of the contact person from the home institution:
Ms. Andrea Hilbig

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**Host institution:**
Receiving institution, department: 

Country: 

ERASMUS-CODE: EUC-No.: 

Name of the contact person from the host institution: 

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Subject area: 

Level (Bachelor year x, Master year x, doctoral year x): 

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

Number of teaching hours: 

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Objectives of the mobility: 

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Added value of the mobility (both for the host institution and for the teacher):

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Content of the teaching programme:

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Expected results (not limited to the number of students concerned):

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Teachers signature:

|…………………………………………………………………………………………………………..|

Date: .................................. Place: ..................................

SENDING INSTITUTION/ORGANISATION

Date: ..................................  coordinator’s signature: ..................................

Place: ..................................

RECEIVING INSTITUTION

Date: ..................................  coordinator’s signature: ..................................

Place: ..................................