

## **Europass Mobility**

## Holder of the document

1	SURNAME(S)*	2	FIRST NAME(S)*	3	ADDRESS
4	DATE OF BIRTH	5	NATIONALITY		
	dd/mm/yyyy				
lss	uing organisation				
6	NAME OF THE ORGANISATION *	7	DOCUMENT NUMBER *	8	ISSUING DATE *
	LPO NORD GRANDE TERRE		FR001_C_000247824		19/05/2017
					dd/mm/yyyy
Se	nding partner				
9	NAME AND ADDRESS *			10	STAMP OR/AND SIGNATURE
3	LPO NORD GRANDE TERRE SITE DE BEAUPORT 97117 PORT LOUIS FRANCE				
11	SURNAME(S) AND FIRST NAME(S° OF REFER	REN	CE PERSON/MENTOR *	12	TELEPHONE
	DERUSSY ODILE				+590590217350
13	TITLE/POSITION			14	E-MAIL
	MANAGER				ce.9711082z@ac-guadeloupe.fr
Но	st partner				
15	NAME AND ADDRESS *			16	STAMP OR/AND SIGNATURE
17	SURNAME(S) AND FIRST NAME(S° OF REFER	REN	CE PERSON/MENTOR *	18	TELEPHONE
19	TITLE/POSITION			20	E-MAIL

Europass Mobility is a standard European document, which records details of the contents and the results - in terms of skills and competences or of academic achievements - of a period that a person of whatever age, educational level and occupational status has spent in another European country (UE/EFTA/EEA and candidate countries) for learning purposes.

<sup>\*</sup> Headings marked with an asterisk are mandatory.



## Description of the Mobility experience

21	OBJECTIVE OF THE MOBILITY EXPERIENCE *
22	EDUCATION OR TRAINING INITIATIVE IN THE COURSE OF WHICH MOBILITY EXPERIENCE WAS COMPLETED
23	COMMUNITY OR MOBILITY PROGRAMME INVOLVED
24	DURATION OF THE MOBILITY EXPERIENCE  FROM * 20 TO *  dd/mm/yyyy dd/mm/yyyy   Ils acquired during the Mobility experience
26A	ACTIVITIES/TASKS CARRIED OUT *
27A	JOB-RELATED SKILLS
28A	LANGUAGE SKILLS
29A	COMPUTER SKILLS
30A	ORGANISATIONAL / MANAGERIAL SKILLS
31A	COMMUNICATION SKILLS
32A	OTHER SKILLS
33A	DATE *  34A SIGNATURE OF THE REFERENCE PERSON/MENTOR *  35A SIGNATURE OF THE HOLDER

<sup>\*</sup> Headings marked with an asterisk are mandatory.