

INDIVIDUAL TRAVEL REPORT for travel costs and costs of stay

To be filled in by each participant

In case of circular/multiple travels, please fill in separate Individual Travel Reports.

Ref. No. Px-ITR-xxx

Project No. 598963-EPP-1-2018-1-AL-EPPKA2-CBHE-JP

The reference number must correspond to the progressive numbering indicated in the financial statements in the final report

(1) PERSONAL DATA

Surname: Forename:

Home institution:

Staff position/student year of study at home institution:

(2) TYPE OF ACTIVITY (Tick as appropriate)

STAFF

<input type="checkbox"/>	Teaching/training assignment
<input type="checkbox"/>	Training and retraining purposes
<input type="checkbox"/>	Updating programmes and courses
<input type="checkbox"/>	Practical placements in companies, industries and institutions
<input type="checkbox"/>	Project management related meetings
<input type="checkbox"/>	Workshops and visits for result dissemination purposes

STUDENTS

<input type="checkbox"/>	Study period
<input type="checkbox"/>	Participation in intensive courses
<input type="checkbox"/>	Practical placements, internships in companies, industries or institutions
<input type="checkbox"/>	Participation in short term activities linked to the management of the project

(3) DETAILS OF THE TRAVEL

PERIOD*	From (Depart date) (dd/mm/yy)	To (Return date) (dd/mm/yy)
PLACE OF DEPARTURE**	HOME INSTITUTION	
	COUNTRY..... CITY.....	
PLACE OF DESTINATION/ LOCATION OF ACTIVITY	HOST INSTITUTION	
	COUNTRY..... CITY.....	
TRAVEL DISTANCE***	Km	

**Please indicate period of travel from departure to return to place of origin*
*** If different from Home institution please enclose authorisation from the Agency*
****Travel distance in Km (One-way travel using distance calculator:http://ec.europa.eu/programmes/erasmus-plus/tools/distance_en.htm) from place of departure to location of activities*

(4) DETAILS OF THE ACTIVITY

DATES (excluding travel)	From (date): To (date):
DESCRIPTION OF ACTIVITY(IES) PERFORMED (brief description of the activities performed)	
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SIGNATURE OF THE PARTICIPANT

I hereby declare that I have been carrying out the above-mentioned activities.

Date:.....

Signature: