國立臺灣師範大學運動與休閒學院 書函

受文者:如正副本

發文日期:中華民國 113 年 01 月 29 日	承辦單位:運動與休閒學院
發文字號:師大運院字第 113000010 號	承 辨 人:陳姿羽小姐
速 别:最速件	聯絡電話:3475
密等及解密条件或保密期限:普通	電子信箱:falinechen@ntnu.edu.tw
附件:如文	

- 主旨:有關本院辦理「113 學年度第1次立陶宛體育大學 Erasmus+ 獎助金申請案」,敬請轉知所屬師生依規定提出申請,請查 照。
- 說明:
 - 一、本院已於 112 年 1 月 16 日與立陶宛體育大學簽訂 Erasmus+獎助金合作協議書。
 - 二、名額共計:教師1名、學生1名。
 - 三、本院師生申請立陶宛體育大學 Erasmus+獎助金之條件及 相關規定如下:
 - (一)必須是本院教師、在校生,並已授課/修習至少兩個學期。
 - (二) 師生英語能力成績須達 CEFR B2 以上。
 - (三)學生於本校各學期學業平均分數達 3.0 以上。四、赴外期間:教師7日、學生5個月。
 - 五、申請教師應繳納下列資料以及證明文件乙份:
 - (一) 個人 CV。
 - (二) 學術表現相關資料。
 - (三) 英語語言檢定證明影本。
 - (四) 立陶宛體育大學申請文件(格式請參考附件3)。
 六、申請學生應繳納下列資料以及證明文件乙份:
 - (一) 動機信(格式請參考附件1)。
 - (二) 個人履歷(格式請參考附件2)。

- (三) 立陶宛體育大學申請文件(格式請參考附件 4-6)。
- (四) 1000 字以上赴外讀書計畫(格式不限)。
- (五) 本校教師推薦信一封(英文書寫)。
- (六) 指導教授同意書。
- (七) 英文歷年學業成績單正本 (各一份)。
- (八) 英語語言檢定證明影本。
- 七、申請截止日期:請師生於113年4月26日(星期五)前將 申請資料繳交至運動與休閒學院辦公室陳姿羽專任助理。 八、遴選方式(採三階段進行):
 - (一) 第一階段:由學院審核申請文件(如符合申請資格之申請人為一位,將直接薦送此申請人)。
 - (二) 第二階段:如符合申請資格之申請人超過一位以上, 將另行公布面試時間進行甄選。
 - (三) 第三階段:依與交流單位合約規定,由本院薦送之 師生,立陶宛體育大學保留最後核定權。

正本:體育與運動科學系、運動競技學系、運動休閒與餐旅管理研究所 副本:運動與休閒學院



【附件1】

Month Date, 20XX

Dear Committee Members:

Sincerely,

[English Signature]

(Name) Xiao-Ming, Wang (Department) Address: No. 162, Section 1, Heping E. Rd., Taipei City 106, Taiwan E-mail: Abcd@yahoo.com.tw Tel: +886-912-123-123

Xiao-Ming Wang (David Wang)

+886-912-123-123/abcd1@yahoo.com.tw/Address

OBJECTIVE	To obtain a position that will enable me to use my strong				
	organizational skills, award-winning educational background, and				
	ability to work well with people.				
EDUCATION	National Taiwan Normal University	Taipei, Taiwan			
	College of Art	Sep. 2011- June. 2013			
	Master Degree				
	National Taiwan Normal University	Taipei, Taiwan			
	College of Art	Sep. 2008- June. 2012			
	Bachelor Degree				
EXPERIENCE	2017 Summer Camp	Tokyo, Japan			
	Leader	May. 2017- Aug. 2017			
	Media Reception				
	National Taiwan Normal University	Taipei, Taiwan			
	Teaching Assistant				
	• Tennis	Feb. 2012- Jun. 2012			
	• Baseball	Sep. 2011- Jan. 2012			
PUBLICATIONS	• Wang, X. M. & Chang, D. M. (2016). I love Beatles. Beatles			
	Education Journal, England: 49(4),	415-430.			
	• Wang, X. M. (2015). I love Arctic M	onkey. Beatles Education			
	Journal, England: 49(4), 415-430.				
PRESENTATIONS	• Wang, X. M. (2016). The story of us	s. Poster presented at the			
POSTERS	European College of Sport Science	e, Vienna, A.T.			

	•	Wang, X. M. (2016). The good story. Oral presented at the		
		European College of Sport Science, Vienna, A.T.		
PROJECTS	•	2015-2016 How to manage the emotional distress. New		
		Southern Project. Ministry of Science and Technology. Taiwan		
HONORS	•	2018 Distinguished Research Award, Ministry of Science and		
		Technique, Taiwan		
	•	2017 Outstanding Research Award, Ministry of Education,		
		Taiwan		
	•	2015 Youth Prize: Scholar Category, China Youth Corps, Taiwan		
LANGUAGE	•	Chinese (native); English (proficient)		





Higher Education Mobility Agreement form Participant's name

Mobility Agreement Staff Mobility For Teaching¹

Planned period of the teaching activity: from ??/??/2024 till ??/??/2024

Duration (days) - excluding travel days: 5

If applicable, planned period of the virtual component: from [day/month/year] to [day/month/year]

The teaching staff member

Last name (s)	First name (s)	
Seniority ²	Nationality ³	
Sex [<i>M</i> / <i>F</i>]	Academic year	2024/2025
E-mail		

The Sending Institution/Enterprise⁴

Name	National Taiwan Normal University					
Erasmus code ⁵ (if applicable)	OID: E10029938	Faculty/Department	College of Sports and Recreation			
Address	162, Section 1, Heping E Rd.	Country/ Country code ⁶	Taiwan / TW			
	Taipei City					
Contact	Ms Faline Tzu-Yu	Contact person	falinechen@ntnu.edu.tw			
person name and	Chen	e-mail / phone	+886 (0)2-7749-3475			
position	International Affairs					
		Size of enterprise	□<250 employees			
	(if applicable)		□>250 employees			

The Receiving Institution

Name	Lithuanian Sports University				
Erasmus code (if applicable)	LT KAUNAS04	Faculty/Department			
Address	Sporto Str. 6, 44221 Kaunas	Country/ Country code	Lithuania / LT		
Contact person name and position	Mr. Tomas Kukenys Erasmus Institutional Coordinator	Contact person e-mail / phone	tomas.kukenys@lsu.lt +370 37 302 672		

For guidelines, please look at the end notes on page 3.





Higher Education Mobility Agreement form Participant's name

Section to be completed BEFORE THE MOBILITY

I. PROPOSED MOBILITY PROGRAMME

Main subject field⁷: 1014 (Sports)

Level (select the main one): Short cycle (EQF level 5) \Box ; Bachelor or equivalent first cycle (EQF level 6) \Box ; Master or equivalent second cycle (EQF level 7) \Box ; Doctoral or equivalent third cycle (EQF level 8) \Box

Number of students at the receiving institution benefiting from the teaching programme: ?? students.

Number of teaching hours: 8 hours

Language of instruction: English

Overall objectives of the mobility:

<mark>???</mark>

Added value of the mobility (in the context of the modernisation and internationalisation strategies of the institutions involved):

□ Increasing attainment levels to provide the graduates and researchers Europe needs

- □ Improving the quality and relevance of higher education
- imes Strengthening quality through mobility and cross-border cooperation

□ Linking higher education, research and business for excellence and regional development

□ Improving governance and funding

Comments: ???

Content of the teaching programme:

<mark>???</mark>

Expected outcomes and impact (e.g. on the professional development of the teaching staff member and on the competences of students at both institutions):

<mark>???</mark>





Higher Education Mobility Agreement form Participant's name

II. COMMITMENT OF THE THREE PARTIES

By signing⁸ this document, the teaching staff member, the sending institution/enterprise and the receiving institution confirm that they approve the proposed mobility agreement.

The sending higher education institution supports the staff mobility as part of its modernisation and internationalisation strategy and will recognise it as a component in any evaluation or assessment of the teaching staff member.

The teaching staff member will share his/her experience, in particular its impact on his/her professional development and on the sending higher education institution, as a source of inspiration to others.

The teaching staff member and the sending institution commit to the requirements set out in the grant agreement signed between them.

The teaching staff member and the receiving institution will communicate to the sending institution/enterprise any problems or changes regarding the proposed mobility programme or mobility period.

The teaching staff member

Name: ???

Signature:

Date:

The sending institution/enterprise

Name of the responsible person: ???

Signature:

Date:

The receiving institution

Name of the responsible person: Tomas Kukenys, Erasmus Institutional Coordinator Signature: Date:

¹ In case the mobility combines teaching and training activities, **this template** should be used and adjusted to fit both activity types.

 $^{^{2}}$ **Seniority:** Junior (approx. < 10 years of experience), Intermediate (approx. > 10 and < 20 years of experience) or Senior (approx. > 20 years of experience).

³ **Nationality:** Country to which the person belongs administratively and that issues the ID card and/or passport.

⁴ All references to "**enterprise**" are only applicable to mobility for staff between EU Member States and third countries associated to the programme or within Capacity Building projects.

⁵ **Erasmus Code:** A unique identifier that every higher education institution that has been awarded with the Erasmus Charter for Higher Education receives. It is only applicable to higher education institutions located in EU Member States and third countries associated to the programme.

⁶ Country code: ISO 3166-2 country codes available at: <u>https://www.iso.org/obp/ui/#search</u>.

⁷ The <u>ISCED-F 2013 search tool</u> (available at <u>http://ec.europa.eu/education/tools/isced-f_en.htm</u>) should be used to find the ISCED 2013 detailed field of education and training.

⁸ Circulating papers with original signatures is not compulsory. Scanned copies of signatures or electronic signatures may be accepted, depending on the national legislation of the country of the sending institution (in the case of mobility with third countries not associated to the programme: the national legislation of the EU Member State or third country associated to the programme). Certificates of attendance can be provided electronically or through any other means accessible to the staff member and the sending institution.



LITHUANIAN SPORTS UNIVERSITY

Sporto str. 6, LT-44221 Kaunas, Lithuania

Phone: (370 690) 09861 E-mail: lsu@lsu.lt Web site: http://www.lsu.lt

APPLICATION FORM FOR <u>EXCHANGE STUDENTS</u> (Complete the form clearly in CAPITAL letters)

ACADEMIC YEAR: 2024 / 2025

PERSONAL DATA			
Family Name*:			
Given Names*:			
Place of birth:	Date of birth (D	/M/Y):	
Gender: 🗆 Male 🗆 Female	Nationality:		
CORRESPONDENCE ADDRESS UNTIL YOUR A	RRIVAL TO KAUN	AS	Photo
Street:		City:	
Postal code: Country:			
Phone:			
E-mail:			
A PERSON TO CONTACT IN CASES OF EMERG	GENCY		
Name and relationship to the student:			
Contact information:			

* Please write family and given names exactly as in your passport (or ID card) as it is very important while preparing your acceptance documents.

HOME INST	HOME INSTITUTION				
Name of inst	itution and full address:				
CONTACT PI	RSON				
Name:		Position:			
	Street:	City:			
Address	Postal code:	Country:			
Phone:	Phone: E-mail:				
CURRENT STUDIES					
Faculty: Field of study:					
Degree for which you are currently studying:					
Number of h	igher education study years prior to departure abroad	:			

LANGUAGE SKILLS							
Native language: Language of instruction at home institution (if not native language):							
Other languages:	I am current Ianguage	I am currently studying this language		I have sufficient knowledge to follow lectures		I would have sufficient knowledge to follow lectures if I had some extra preparation	
Yes		No	Yes	No	Yes	No	

STUDY PERIOD AT LSU						
Planned period of stu	ıdy (duration in months)	:				
Autumn semester		From:		То:		
Spring semester		(DD /MM/ YY)		(DD /MM/ YY)		
Type of activity: □ Courses (please fill is for Studies)		ill in the Learning Agreement		al training (please fill in the Learning ment for Traineeship)		
	□ Other:					

APPLICATION DEADLINES:

EU/Non-EU Students

Autumn semester – May 1st

Spring semester – November 1st

With this application form you need to send us the following:

- Learning Agreement (or you can use **Online Learning Agreement**)
- Transcript of Records
- Copy of your passport (ID card)
- Application Form for Accommodation (if necessary)
- Certificate of good health (in English)

Note: If needed, any changes in the Learning agreement must be done before arrival.

SIGNATURES					
I certify that the information provided in this application is correct and complete.					
Applicant's signature: Date:					
I hereby, confirm that the above-mentioned student was selected for the exchange p	eriod at your institution.				
Contact person's signature:	Date:				

Completed application together with the required documents must be sent by the address below:

International Relations Office Lithuanian Sports University Sporto g. 6, LT-44221 Kaunas, Lithuania Phone: (+ 370 690) 09923, erasmus@lsu.lt

Erasmus+ Learning Agreement Student Mobility for Studies International Mobility

General information

	Last name(s)	First name(s)		Date of birth Nationality			Gender
Student							
	ESI	l		Study cycle	Field of education	on	Field of education
					(ISCED)		(clarification)
			•			Adminis	trative contact person name; email;
	Name	Faculty/Departm	ent	Erasmus code	Country	phone	
Sending Institution							
						Admini	strative contact person name; email;
.	Name	Faculty/Department City		City	Country	phone	
Receiving Institution	Lithuanian Sports	n/a		Kaunas	Lithuania		Ms Justė Knatauskaitė,
institution	University					Student Mobility Coordinator	
						e	rasmus@lsu.lt; +370 69009923
The level of language	ge competence in	[indicate here the	main la	nguage of instruction	on] that the student alrea	dy has or a	agrees to acquire by the start of the
	study period is:						
	$A1 \square A2 \square B1 \square B2 \square C1 \square C2 \square$ Native speaker \square						

Mobility type and duration

Mobility type (select one)	Estimated duration (to be confirmed by the Receiving Institution)
 Semester(s) □ / Virtual component (only if applicable) □ 	Planned period of the physical mobility:
• Blended mobility with short-term physical mobility	from [day (optional)/month/year]
• Short-term doctoral mobility \Box / Virtual component <i>(only if applicable)</i> \Box	to [day (optional)/month/year]

Study Programme at the Receiving Institution Mobility type: Semester(s)

Table A	Component code (if any)	Component title at the Receiving Institution (as indicated in the course catalogue)	Semester [e.g. autumn/spring; term]	Number of ECTS credits (or equivalent) to be awarded by the Receiving Institution upon successful completion
				Tatal
				Total:

Recognition at the Sending Institution

Mobility type: Semester(s)

Table B	Component code (if any)	Component title at the Sending Institution (as indicated in the course catalogue)	Semester [e.g. autumn/spring; term]	Number of ECTS credits (or equivalent) to be recognised by the Sending Institution	Automatic recognition
					Yes 🗆 No 🗆
					Yes 🗆 No 🗆
					Yes 🗆 No 🗆
					Yes 🗆 No 🗆
					Yes 🗆 No 🗆
					Yes 🗆 No 🗆
					Yes 🗆 No 🗆
				Total:	

If applicable, description of the virtual component at Receiving Institution and recognition at the Sending Institution

Mobility type: Semester(s)

Table C	Component code (if any)	Component title or description of the study programme at the Receiving Institution	Short description of the virtual component (obligatory field):	Number of ECTS credits to be awarded	Automatic recognition
					Yes 🗆 No 🗆
					Yes 🗆 No 🗆
					Yes 🗆 No 🗆
				Total:	

Study Programme at Receiving Institution and recognition at the Sending Institution

Mobility type: Blended mobility with short-term physical mobility

Component code (if any)	Component title or description of the mobility programme	Short description of the virtual component (obligatory field):	Number of ECTS credits to be awarded	Automatic recognition
				Yes 🗆 No 🗆
				Yes 🗆 No 🗆
				Yes 🗆 No 🗆
			Total:	

Mobility type: Short-term doctoral mobility

Component code (if any)	Component title or description of the mobility programme	Short description of the virtual component (optional field):	Number of ECTS credits to be awarded	Automatic recognition
				Yes 🗆 No 🗆
				Yes 🗆 No 🗆
				Yes 🗆 No 🗆
			Total:	

Commitment of the three parties Any Mobility type

Changes to the learning agreement

By signing this document, the student, the Sending Institution and the Receiving Institution confirm that they approve the Learning Agreement and that they will comply with all the arrangements agreed by all parties. Sending and Receiving Institutions undertake to apply all the principles of the Erasmus Charter for Higher Education relating to mobility for studies. The Beneficiary Institution and the student should also commit to what is set out in the Erasmus+ grant agreement. The Receiving Institution confirms that the educational components listed are in line with its course catalogue or as agreed otherwise and should be available to the student. The Sending Institution commits to recognise all the credits or equivalent units gained at the Receiving Institution for the successfully completed educational components and to count them towards the student's degree. The student and the Receiving Institution will communicate to the Sending Institution any problems or changes regarding the study programme, responsible persons and/or study period.

Commitment	Name	Email	Position	Date	Signature
Student			Student		
Responsible person at the Sending Institution					
Responsible person at the Receiving Institution					

Mobility type: Semester(s)

Exceptional changes to Table A (to be approved by the student, the responsible person in the Sending Institution and the responsible person in the Receiving Institution)						ution)
Table A2	Component code (if any)	Component title at the Receiving Institution (as indicated in the course catalogue)	Deleted component [tick if applicable]	Added component [tick if applicable]	Reason for change	Number of ECTS credits (or equivalent)
					Choose an item.	
					Choose an item.	

	Exceptional changes to Table B (if applicable) (to be approved by the student and the responsible person in the Sending Institution)						
Table B2	Component code (if any)	Component title at the Sending Institution (as indicated in the course catalogue)	Deleted component [tick if applicable]	Added component [tick if applicable]	Reason for change	Number of ECTS credits (or equivalent)	Automatic recognition
					Choose an item.		Yes 🗆 No 🗆
					Choose an item.		Yes 🗆 No 🗆

Exceptional changes to Table C (if applicable)	
(to be approved by the student and the responsible person in the Sending Institution)	

Table C	Component code (if any)	Component title or description of the study programme at the Receiving Institution	Short description of the virtual component (obligatory field):	Reason for change	Number of ECTS credits to be awarded	Automatic recognition
						Yes 🗆 No 🗆
						Yes 🗆 No 🗆

• In case of changes to the learning agreement for mobility types: Blended mobility with short-term physical mobility or Short-term doctoral mobility, please create a new learning agreement

Glossary

Term	Definition/Explanation
Nationality	Country to which the person belongs administratively and that issues the ID card and/or passport.
The European Student Identifier (ESI)	A unique European Identifier number used to identify and authenticate students using the Erasmus+ Mobile App and/or the desktop version of the app to fill in and sign their online learning agreement. If the sending institution does not issue an ESI for its students an alternative mechanism for identifying and authenticating students can be accepted. For more information, visit the Erasmus Without Paper Competence Centre.
Study cycle	Short cycle (EQF level 5) / Bachelor or equivalent first cycle (EQF level 6) / Master or equivalent second cycle (EQF level 7) / Doctorate or equivalent third cycle (EQF level 8).
Field of education The ISCED-F 2013 search tool available at http://ec.europa.eu/education/international-star classification-of-education-isced en should be used to find the ISCED 2013 detailed field education and training that is closest to the subject of the degree to be awarded to the stude the Sending Institution.	
Erasmus code	A unique identifier that every higher education institution that has been awarded with the Erasmus Charter for Higher Education (ECHE) receives. It is only applicable to higher education institutions located in EU Member States and third countries associated to the programme.
Administrative Contact person	A person who provides a link for administrative information and who, depending on the structure of the higher education institution, may be the departmental coordinator or works at the international relations office or equivalent body within the institution.
Mobility type: Semester(s)	A study period abroad lasting at least one academic term/trimester or 2 months to 12 months (long-term mobility)
Blended mobility	Any mobility can be carried out as a "blended mobility" by combining the study period abroad with on virtual component at the receiving institution before, during or after the physical mobility to further enhance the learning outcomes.
Short description of a virtual component	An indication of whether the virtual component is an online course(s), embedded in a course(s) selected at the receiving institution, embedded in a blended intensive programme and/or other type of online activity at the receiving institution along with component title(s) or short description of the online activity.
Blended mobility with short term physical mobility	If a long-term physical mobility is not suitable, the student may undertake a study period abroad lasting between 5 days and 30 days and combined with a compulsory virtual component to facilitate an online learning exchange and/or teamwork.
Short-term doctoral mobility	A study period abroad lasting between 5 days and 30 days. An optional virtual component to facilitate an online learning exchange and/or teamwork can be added to further enhance the learning outcomes.

ECTS credits (or equivalent)	In countries where the "ECTS" system is not in place, in particular for institutions located in third countries not associated to the programme not participating in the Bologna process, "ECTS" needs to be replaced in the relevant tables by the name of the equivalent system that is used, and a web link to an explanation to the system should be added.					
Automatic recognition	All credits gained abroad– as agreed in the Learning Agreement and confirmed by the Transcript of Records – will be transferred without delay and counted towards the students' degree without any additional work or assessment of the student. This is signalled in the learning agreement by the "Yes" check box. If the "No" check box is selected, a clear justification needs to be provided and an indication on what other type of formal recognition will be applied e.g. registration in the students' <u>diploma supplement</u> or <u>Europass</u> Mobility Document.					
Educational component	A self-contained and formal structured learning experience that features learning outcomes, credits and forms of assessment. Examples of educational components are: a course, module, seminar, laboratory work, practical work, preparation/research for a thesis, mobility window or free electives.					
Level of language competence	A description of the European Language Levels (CEFR) is available at: <u>https://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr</u>					
Course catalogue	Detailed, user-friendly and up-to-date information on the institution's learning environment that should be available to students before the mobility period and throughout their studies to enable them to make the right choices and use their time most efficiently. The information concerns, for example, the qualifications offered, the learning, teaching and assessment procedures, the level of programmes, the individual educational components and the learning resources. The Course Catalogue should include the names of people to contact, with information about how, when and where to contact them.					
Responsible person at the Sending Institution	An academic who has the authority to approve the Learning Agreement, to exceptionally amend it when it is needed, as well as to guarantee full recognition of such programme on behalf of the responsible academic body. The name and email of the Responsible person must be filled in only in case it differs from that of the Contact person mentioned at the top of the document.					
Reasons for deleting a	1. Previously selected educational component is not available at the Receiving Institution					
component	 Component is in a different language than previously specified in the course catalogue Timetable conflict Other (please specify) 					
Reason for adding a	5. Substituting a deleted component					
component	6. Extending the mobility period					
	 Adding a virtual component Other (please specify) 					



LITHUANIAN SPORTS UNIVERSITY

Sporto str. 6, LT-44221 Kaunas, Lithuania Phone: +370 690 09861 e-mail: Isu@Isu.It, http://www.Isu.It

APPLICATION FORM FOR ACCOMMODATION

(if handwritten to be completed clearly in CAPITAL letters)

ACADEMIC YEAR: 20	24/ 2025	AUTUN	IN SEMESTER:		SPRING SEMESTER:			
PERSONAL DATA								
Family Name:			Given Names:					
Date of birth (D/ M/ Y):			Place of birth:					
Gender:	Male	🗆 Male			🗆 Female			
Correspondence address until your arrival to Kaunas Street:								
City:	Postal code:	Postal code:		Country:				
Phone:	E-mail:			•				

HOME INSTITUTION (if applicable)				
Name of the home institution:				
Contact person at your home institution:				
Phone:	E-mail:			

HOUSING INFORMATION						
Arrival (DD/MM/YY):		f you cannot give the exact dates of arrival or departure when sending this				
Departure (DD/IVIIVI/YY):		application for the first time, give an approximate date and supply more				
Planned duration of stay:		formation later.				
Please indicate a preferred room (see the table						
below)						

Options	Renovated room (monthly fee for one person)	Non-renovated room (monthly fee for one person)	Old room (monthly fee for one person)
Triple room (living three persons in a room)	140 EUR	120 EUR	90 EUR
Triple room (living two persons in a room)	180 EUR	-	-
Double room (living two persons in a room)	140 EUR	120 EUR	-

Deposit: two months' rent (e.g. 200 EUR x 2 = 400 EUR). The deposit will be refunded if there is no damage to the room.

NOTE: deposit and monthly fee are subjects to change.

The accommodation fee for the entire scheduled study period and the deposit must be paid at least 10 days before arrival. Do not pay for the room until you get the confirmation together with payment details. If your selected room is not available, you will be offered another option.

You will be charged of the last cleaning: 100 EUR for one person at the end of your stay.

APPLICATION DEADLINES:

Autumn semester – May 15th

Spring semester – November 15th

Applicant's signature:

Please send a scanned copy of this form until the Application deadline by e-mail to: mantas.valavicius@lsu.lt

Date: