	1213.00			
Erasmus+ Traineesh	nips Offer Form   1901 18 2201			
INFORMATION OF ORGANIZATION/ENTERPRISE/INSTITUTION				
Name of organization/enterprise/institution	ISTITUTO CONPRENSIVO "VIA RABERTÍ"			
Address	UIA RAIBERTI 4			
Postal Code	20800			
City	MONZA			
Country	ITALY			
Telephone Number	038 322106			
Fax	038/3803261			
E-mail Address	mic8f6002@istruzione.iT			
Website	icviarai berti-gov.it			
Size of organization/enterprise/institution	3 PRIMARY SCHOOLS, 1 KINDER GARDEN, 1 SECON.			
(number of employees)	3 PRINARY SCHOOLS, 1 KINDER GARDEN & SEGN. WITH APPROXIMATELY 145 EMPLO YEES			
Short description of	IN ALL OF OUR SCHOOLS WE HAVE			
organization/enterprise/institution	HAD THE CLIL PROJECT FOR 5 YEARS			
Other	WITH KOTHER TONGUE TEACHERS			

CONTACT PERSON DETAILS	
Name	ROSSELLA COVELLI
Position in the organization/enterprise/institution	HEAD TEACHER 2nd YEAR
Department	PRIMARY SCHOOL
Telephone Number	<b>h</b>
E-mail Address	ross 72@ 80. it

PLACEMENT INFORMATION				
Department/Function	SUPPORT IN ACTIVITIES			
Type/Title of placement	SUPPORT FOR TEACHER			
Description of tasks/activities	GAMES CONVERSATION VOCABULARY			
Competences to be acquired	GOOD COMPETENCE OF ENGLISH - PREVIOU			
Duration of placement 6 MONTAS	EXPERIENCE WITH YOUNG CHILDREN			
Earliest and latest starting date	NOTOBER / NOVERBER			
Working hours per week	24			

REQUIREMENTS	
Field of Studies	LEVEL CI BO
Language which will be used during the traineeships	ENGLISH
Other Language Skills	
Other Skills	

FACILITIES GUARANTEED BY THE PORGANIZATION/ENTERPRISE/INS		
Financial Support	NONE	
Accommodation	HOST	FAMILY
Canteen/Meals	GRATIS	MEAL
Personal Accident Insurance at work	YES	IL DIRIGENTE SCOLASTIC
Liability Insurance at work	YES	Antenio Prizio