**CONVENTION for Staff Costs Annex 1**

**Ref. No………….……………….…… Tempus Project No. 530750**

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

**Between** ....................................................................................

 ....................................................................................

Hereinafter "the Institution\*"

**And** Name: ... .......................................................................

 Address: ........................................................................

 .........................................................................

Hereinafter "the Staff member"

**The following has been agreed:**

1. The Institution is a member of the partnership for the above-mentioned project

2. The Institution and Staff member agree that the Staff member shall work on this project

 and perform the following duties during the project’s eligibility period

 *dd/mm/yy dd/mm/yy (No of days)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FROM** |  | **TO** |  | **Duration in days:** |  |
| **Duties** **(see Annex 3):** |
|  | Manager |
|  | Researcher, Teacher, Trainer  |
|  | Technical staff |
|  | Administrative staff |

Please describe the specific duties (short overall indication since detailed information has to be given in the accompanying time-sheet):

……………………………………………………………………………………………………………………………………………………………………………………………………………….............................

3. Under no circumstances may salaries and fees exceed local rates of the home country. Fees and salaries should be calculated on the basis of the task performed and not on the status of the person.

4. The cost to be borne by the Tempus grant and/or co-financed is calculated as follows:

|  |  |  |
| --- | --- | --- |
| Number of days devoted to the project (according to time-sheet) | No of days |  |
| Staff costs per day in EUR (see rates in Annex 3) | EUR  |  |
| **Total cost (Tempus grant and co-financing)**Please indicate in the corresponding financial statement in the Final Report the amount paid by Tempus and the amount that was co-financed. | **EUR**  |  |

5. This agreement does not alter in any way the employment conditions already existing between the Institution and the Staff member and has been established solely for the purpose of justifying the Staff costs that the Institution will pay from the Tempus grant or will co-finance.

Done in ........................................................... on ...................................................

Institution ............................... Staff member .................................

Signature and Stamp of the Institution

\* The conventions must be signed by the person concerned, then signed and stamped by the person responsible in the institution where this person is normally employed