##### ALL. B

# **CAP. 2619/3**

# **RELAZIONE FINALE SULL'UTILIZZO DELL'ULTIMO CONTRIBUTO FRUITO**

## CORSI DI FORMAZIONE/AGGIORNAMENTO PER DOCENTI DI ITALIANO - ANNO ……...

*FINAL REPORT ON THE USE OF THE LAST CONTRIBUTION*

*TRAINING / REFRESHER COURSES FOR ITALIAN LANGUAGE TEACHERS– YEAR ………*

**SI PREGA DI COMPILARE IL MODULO IN FORMATO DIGITALEIN OGNI SUA PARTE, PREFERIBILMENTE IN ITALIANO E DI COMPLETARLO CON LA FIRMA, LA DATA E IL TIMBRO DELL’ ISTITUZIONE RICHIEDENTE.** *Please fill in the form electronically, preferably in Italian. All sections should be completed in full, signed and stamped by the applicant.*

**PARTE RISERVATA ALLE ISTITUZIONI UNIVERSITARIE** *(ONLY FOR UNIVERSITIES)*

**DENOMINAZIONE DELL’ISTITUZIONE E SEDE**

*NAME OF THE UNIVERSITY and COUNTRY*

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Istituzione statale Istituzione privata Istituzione pubblico-privata

*Public University Private University Public/Private Institution*

***E-mail* Dipartimento di Italiano** *(Email of the Italian Studies Department)***:**

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***E-mail* Docente di italiano di riferimento** *(Email of the reference Lecturer of Italian language)***:**

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**DESCRIZIONE DEL PROGETTO /** *Project description*

**CORSO DI FORMAZIONE / AGGIORNAMENTO IN PRESENZA:**

*Face-to-face training / refresher course*

**CORSO DI FORMAZIONE / AGGIORNAMENTO A DISTANZA:**

*E-learning training / refresher course*

**N.B. Entrambe le tipologie di corsi sono attivate solo con un numero minimo di 15 partecipanti.**

*NB: Both type of courses may be activated only with a minimum of 15 participants.*

**SI È GIÀ BENEFICIATO DEL CONTRIBUTO IN PASSATO?** / *Have you ever received a contribution?*

**NO**, era la prima richiesta di contributo / *NO, this was our first application*

**SÌ**, si è beneficiato del contributo per n. ……… anni */ YES, we have been receiving contributions for n. ……… years*

Ultimo contributo ricevuto nel (specificare l’anno):

*2020 2019 2018 2017 2016 2015*

*Last contribution receveid in (please specify the year):*

*2020 2019 2018 2017 2016 2015*

**TEMA DEL CORSO** / *Topic of the course*

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**SEDE DEL CORSO** / V*enue of the course*

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**PERIODO DI SVOLGIMENTO DEL CORSO** / *Period in which the course was held*

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**DURATA DEL CORSO (N. GG. - N. ORE)** / *Duration of the course ((no. days, no. hours)*

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**NUMERO DI INCONTRI** / *Number of meetings*

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**ENTE FORMATORE** / *Training Institution*

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**DIRETTORE DEL CORSO** / *Course supervisor*

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**NOMI, PROFILO E ISTITUZIONE DI PROVENIENZA DEI FORMATORI**

*Trainers’ names and qualifications, Institution they work for:*

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**OBIETTIVI E FINALITÀ** **RAGGIUNTI – VALUTAZIONE SULL’EFFICACIA E SULLE RICADUTE DEL CORSO**

**(MAX. 20 RIGHE)**

*Objectives and purposes achieved – Evaluation of the effectiveness and of the impact of the course*

*(max. 20 lines)*

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**PROGRAMMA DEL CORSO** **(MAX. 30 RIGHE)** / *Course programme (max. 30 lines)*

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**NUMERO COMPLESSIVO DEI PARTECIPANTI** / *Total number of participants*

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**UNIVERSITÀ PER CUI I PARTECIPANTI LAVORANO** / *Universities for which participants work*

Università/*University* ……………………………………………………………………………………………………………………………….

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Università/*University* ……………………………………………………………………………………………………………………………….

**METODOLOGIA DI CONDUZIONE DEL CORSO** **(MAX. 20 RIGHE)**

*Course methodological approach (max. 20 lines)*

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**STRUMENTI E MATERIALI CHE SONO STATI UTILIZZATI (MAX. 20 RIGHE)**

*Tools and* *materials that were used (max. 20 lines)*

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**STRUMENTI DI VALUTAZIONE** **CHE SONO STATI UTILIZZATI (MAX. 20 RIGHE)**

*Assessment tools that were used (max. 20 lines)*

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**PROSPETTO RIEPILOGATIVO DEI COSTI** / *Cost statement*

1. **COMPENSI DEI FORMATORI** / *Remuneration of trainers*

Valuta locale / *Local currency* …………………………………… **EURO (€)** ……………………………………

1. **SPESE DI VIAGGIO** / *Travel expenses*

Valuta locale / *Local currency* …………………………………… **EURO (€)** ……………………………………

1. **MATERIALE DIDATTICO** / *Teaching materials*

Valuta locale / *Local currency* …………………………………… **EURO (€)** ……………………………………

1. **SPESE DI SEGRETERIA** / *Administrative costs*

Valuta locale / *Local currency* …………………………………… **EURO (€)** ……………………………………

1. **ALTRO (SPECIFICARE)** / *Other goods or services (please, specify)*

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Valuta locale / *Local currency* …………………………………… **EURO (€)** ……………………………………

**COSTI TOTALI** *somma da 1 a 5 / Total costs (sum from 1 to 5)*

Valuta locale / *local currency* ……………………………………**EURO (€)** ……………………………………

**DI CUI** / *of which*

**COSTI A CARICO DEL RICHIEDENTE** / *Costs covered by applicant*

Valuta locale / *local currency* ……………………………………**EURO (€)** ……………………………………

**CONTRIBUTO RICEVUTO** */ Contribution received* ***EURO ……………………………………***

Valuta locale / *Local currency:* ……………………………………

Data */ Date ……………………………...*, Timbro / *Stamp*

**Il Rettore / Preside**

*The Dean / Department Head / Headmaster / Principal*

(Timbro e firma *– stamp and handwritten signature*)

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**PARTE RISERVATA ALL’AMBASCIATA**

IN RELAZIONE ALL’UTILIZZO DEL CONTRIBUTO PER CORSI DI FORMAZIONE/AGGIORNAMENTO PER DOCENTI DI ITALIANO OPERANTI NELLE UNIVERSITÀ STRANIERE (CAP. 2619/3 – E. F. DI RIFERIMENTO) SI ESPRIME PARERE FAVOREVOLE.

Valutazione

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Si dichiara la conformità del presente documento e dei relativi allegati all’originale cartaceo conservato agli atti di questa sede.

Data *……………………………...* Timbro tondo L’Ambasciatore d’Italia

(Firma digitale)

N.B. Il presente prospetto dovrà essere compilato e presentato a conclusione del corso e costituisce documentazione indispensabile per richiedere un nuovo contributo. Qualora l'ultimo contributo ricevuto sia rimasto inutilizzato o sia stato impropriamente utilizzato, in mancanza della restituzione dell'importo NON sarà possibile procedere all’assegnazione di un nuovo contributo. / This form has to be filled in and sent at the conclusion of the course. It represents a precondition in order to ask for a new contribution. If the last contribution received has remained unused or has been improperly used, in the absence of the refund of the amount it will NOT be possible to proceed with the assignment of a new contribution.