ERASMUS WITHIN THE LIFELONG LEARNING PROGRAMME
BILATERAL AGREEMENT
for the academic year 2013/2014

between
(name and ERASMUS ID code of the institution)

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SM: Student Mobility

<table>
<thead>
<tr>
<th>Subject area code</th>
<th>Name of subject area</th>
<th>First cycle</th>
<th>Second cycle</th>
<th>Third cycle</th>
<th>From</th>
<th>To</th>
<th>Students</th>
<th>Student months (= sum)</th>
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<tbody>
<tr>
<td>7.1</td>
<td>Geography</td>
<td>2</td>
<td>2</td>
<td>SE</td>
<td>CZ</td>
<td>SE</td>
<td>2</td>
<td>10 (spring preferred)</td>
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<tr>
<td>7.1</td>
<td>Geography</td>
<td>2</td>
<td>2</td>
<td>CZ</td>
<td>SE</td>
<td>SE</td>
<td>2</td>
<td>10</td>
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TS: Teaching Staff mobility

<table>
<thead>
<tr>
<th>Subject area code</th>
<th>Topic(s) taught</th>
<th>Name of the staff member</th>
<th>Home country</th>
<th>Host country</th>
<th>Duration in number of weeks</th>
<th>Number of teaching hours per week</th>
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<td>Geography</td>
<td>Not selected yet</td>
<td>SE</td>
<td>SE</td>
<td>1</td>
<td>8</td>
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</tbody>
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Signatures of the authorised representatives of both institutions

Name of institution: Stockholm University
Name and status of representative: Ass. Prof. Ida Lindel
Signature: [Signature]

Date: 13.12.2012
University stamp

Name of institution: Charles University in Prague, Faculty of Science
Name and status of representative: RNDr. Dagmar Chalušová, Ph.D.
Signature: [Signature]

Date: [Date]
University stamp

* Should be signed by the Rector, the Institutional Co-ordinator or the Head of Department.