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|  | **UNIVERSITY OF CRETE**  **CENTRE OF TRAINING AND LIFELONG LEARNING**  www.kedivim.uoc.gr kedivim@uoc.gr tel +30 2810393661 / 2 |

**EDUCATIONAL PROGRAM FORM**

**Personal evidence**

|  |  |
| --- | --- |
| Name/Surname of **Scientific Cordinator**  Professional Status |  |
| Contact details (Telephone, Email) |  |
| Name/Surname of **Academic Cordinator** |  |
| Contact details (Telephone, Email) |  |

**Educational Program evidence**

|  |  |
| --- | --- |
| **Program title** |  |
| Scientific area (choose one or more of the following):  1. Humanities and Arts  2. Physical Sciences  3. Medicine and Health Sciences  4. Agricultural and Veterinary Sciences  5. Social Sciences  6. Mechanical Engineering and Technology  7. Other (please refer) |  |
| **Sustainable Development Goals (choose one or more categories):**   1. Zero poverty 2. Zero Hunger 3. Good Health and Well-Being 4. Quality Education 5. Gender Equality 6. Clean water and drainage 7. Cheap and clean energy 8. Decent work and economic development 9. Industry, innovation and infrastructure 10. Reduction ofinequalities 11. Sustainable cities and communities 12. Responsible consumption and production 13. Climate action 14. Life below water 15. Life of land 16. Peace, justice and strong institutions 17. Cooperation for the goals   https://sdgs.uoc.gr/ |  |
| **Total duration of the program** (months, teaching hours) | Months : |
| Sum of teaching hours: |
| Sum of workload: |
| **Maximum number of absences** (% percentage of the total teaching hours) | …. % |
| **Target group** (Expected audience/ participants) |  |
| **Minimum / Maximum number of participants**  \*The minimum and maximum number of participants can be modified according to a letter by the Scientific Cordinator, addressed to the Special Account for Research Funds, as well as to the Centre of Training and Lifelong Learning University of Crete | Minimum number:  Maximum number: |
| **Working language** |  |
| **Official Qualification Requirements for participants** |  |
| **Implementation method (%)** | Face to face % |
| Blended ( % face to face , % asynchronous, % synchronous) |
| Distance (e-learning) % |
| **Monitoring process** (e.g. face to face by attendance record, e-learning record, etc) |  |

|  |  |
| --- | --- |
| **Teaching Module** | Duration of teaching modules (hours) |
| **1.** |  |
| **2.** |  |
| **3.** |  |
| **….** |  |
| **……..** |  |
| TOTAL HOURS |  |

**Goal and objectives of the program**

|  |  |
| --- | --- |
| **Program Objective**  (up to 300 words) |  |
| **Educational goals of the program** | |
| **Cognitive Skills** (ability to compile**,** organise and analyse data through observation, comparison, prediction, prioritising, e.g. knowing what something means, understanding its impact...) |  |
| **Psychomotor skills** (ability to use stimuli that develop into a motor activity,to take initiative, to prioritise,to describe something) |  |
| **Behaviours/attitudes** (ability to use acquired cognitive and psychomotor skills in various situations and outside the educational process, attitude formation) |  |

**Detailed presentation of teaching modules**

| **Teaching module title** | **Teaching hours** | | | | | | **Title of submodule** | **Learning outcomes** (Identify the key competences generated by the programme and, if possible, distinguish between general and specific competences, which are the most relevant for the proposed programme.) |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Breakdown of hours per category** | | | **Breakdown of hours per method** | | |
| **Face to face teaching in the classroom** | **Distance e-learning** | |
| **Theory** | **Practice** | **Hours in total** | **Synchronus e-learning** | **Asynchronus e learning** |
| 1….. |  |  |  |  |  |  | **1.1…….** |  |
| 1.1…. |  |  |  |  |  |  | 1.2……… |  |
| 2….. |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |
| …. |  |  |  |  |  |  |  |  |
| Sum of Teaching hours per category |  |  |  |  |  |  |  | |

**Evaluation of learning outcome**

|  |  |
| --- | --- |
| **Learning Outcomes Evaluation process** |  |
|  |
| .. |

**Trainers**

|  |  |
| --- | --- |
| **Full name of trainer/facilitator** |  |
| **Professional status of trainer** |  |
| **Telephone** (office, mobile) |  |
| **Email** |  |
| **Qualifications of trainer** | 1. |
| 2. |
| .. |

|  |  |
| --- | --- |
| **Full name of trainer** |  |
| **Professional status of trainer** |  |
| **Telephone** (office, mobile) |  |
| **Email** |  |
| **Qualifications of trainer** | 1. |
| 2. |
| .. |

**Other Project Team Members**

|  |  |
| --- | --- |
| **Full name** |  |
| **Professional status** |  |
| **Telephone** (office, mobile) |  |
| **Email** |  |

|  |  |
| --- | --- |
| **Full name** |  |
| **Professional status** |  |
| **Telephone** (office, mobile) |  |
| **Email** |  |

**Type of Certificate**

|  |  |
| --- | --- |
| **Certificate or**  **Certificate of attendance** |  |
| ECTS |  |

Participation fee

|  |  |
| --- | --- |
| **Participation fee** |  |
| Method of payment (in total/ in instalments) |  |

**In case the trainee decides to interrupt attendance, paid fees can not be refunded.**

**Collaborations**

|  |  |
| --- | --- |
| **Partner organizations** |  |

**\* to be accompanied by a draft of the relevant agreement**

**FEASIBILITY AND SUSTAINABILITY STUDY OF THE PROGRAMME** (in accordance with Art. 2 of Greek Law 4957/2022, the submission of a proposal must be accompanied by a feasibility and sustainability study of the programme).

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| **Indicate briefly the relevance to the subject, organisational details, budget, range of expenses, etc.)** |