

Una Europa Live My Life 2026



Supervisor endorsement and institutional commitment form

Applicant name	
Position	
Office/unit/department/centre	
Home university	
Professional area/Challenge-based position selected	

Information for supervisors

[Una Europa Live My Life](#) is the alliance's peer-learning and job shadowing programme for **professional services and technical staff**. The programme combines online preparatory activities with a **3–5 day job shadowing mobility** at another Una Europa partner university.

If selected, participants are expected to:

- Attend four mandatory online sessions (3 sessions of around 2 hours each in January 2027 and a final post-mobility online event in June/July 2027)
- Prepare the mobility together with their matched peer
- Undertake the mobility visit of 3–5 days
- **Host their matched colleague** at their own institution
- Disseminate the knowledge acquired within their home institution

The programme is based on **mutual exchange**. Each participant is expected to both **visit** and **host** a colleague from another Una Europa university.



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Supervisor endorsement

By signing this endorsement letter, I confirm that I have discussed this opportunity with the applicant and support his/her participation in the Live My Life programme.

Moreover, **if selected**, I authorise the applicant to participate in:

- Attend four mandatory online sessions (3 sessions of around 2 hours each in January 2027 and a final post-mobility online event in June/July 2027)
- Prepare the mobility together with their matched peer
- Undertake the mobility visit of 3–5 days
- **Host their matched colleague** at their own institution
- Dissemination activities at their home institution, drawing on lessons learned during the mobility

I understand that the programme requires reciprocal peer learning and therefore, where applicable, I support the hosting of the matched colleague within my office/unit/department during the agreed mobility period.

Optional comments from the supervisor. Please indicate, if relevant:

- Why participation would benefit your office/unit
- Specific topics you would encourage the participant to explore
- Any particular expertise your unit could share when hosting the peer

Supervisor details

Name:

Position:

Office/unit/department:

E-mail address:

Signature (digital signatures are accepted):



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