



International Association for the Exchange
Of Students for Technical Experience

IAESTE GHANA

ACCEPTANCE NOTE

N/5-a

Student: Sarthak Sarbahi

Ref. No.: GH-2017-0140

You have been accepted for practical training in: Ghana

Employer: Rakimad Company Limited

Address: PMB KUMASI

Person to contact: Mr. Zaida Madugu

Phone number: +233 266605905

E-mail: zaidanmadugu@gmail.com

Website:

For the following period (day/month/year): from 01.06.2017 - 30.07.2017

STUDENT INFORMATION:

Passport Number: N9235054
Date and Place of Issue: Mumbai

Place of Birth: Ghazibad, Uttar Pradesh

Valid Until 09.05.2026
Nationality: IndianDate of Birth: 03-09-1998
Gender: Male
Marital Status: Unmarried

CONFIRMATION OF ACCEPTANCE

COMPLETE, SIGN AND RETURN THE ATTACHED CONFIRMATION OF ACCEPTANCE (N/5-B) TO US THROUGH YOUR NATIONAL IAESTE COMMITTEE WITHIN TWO WEEKS.

Additional information:

Please send your flight details prior to your travel to the email address: iaestegh@yahoo.com. Member(s) of the Reception Committee will meet you at the KOTOKA INTERNATIONAL AIRPORT, ACCRA on your arrival. You can also contact us on the following telephone numbers: +233 242558235, +233 501 383699, +233 264623525

ENCLOSURES:

- Introduction card
 Reception booklet
 Other forms:

Date (day/month/year):
20TH APRIL, 2017National IAESTE Committee
GHANA

Signature

NATIONAL SECRETARY
IAESTE - GHANA
KNUST-KUMASI
GHANA



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**International Association for the Exchange
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N/5-b

CONFIRMATION OF ACCEPTANCE

Student: Sarthak Sarbahi

Ref. No.: GH-2017-0140

I accept the offer in: Ghana

From: 01.06.2017 - 30.07.2017

Employer: Rakimad Company Limited

Address: PMB KUMASI, Ghana

Person to contact: Mr. Zaida Madugu

Phone number: +233 266605905

E-mail: zaidanmadugu@gmail.com

I shall leave my country on: (day/month/year)

Time and date of arrival: Flight No.....

Place of arrival: (airport)

I shall require lodging from(day/month/year) to(day/month/year)

I will arrange lodging by myself

I AM AWARE THAT I AM RESPONSIBLE FOR ANY FINANCIAL LOSS INVOLVED IF I WITHDRAW OR CHANGE MY START DATE OR CANCEL ANY ROOM ALLOCATED TO ME AFTER HAVING COMPLETED AND SIGNED THIS FORM.

Other important information:

I am insured against illness, liability, accidents including death and repatriation in case of illness, accidents or death during my traineeship according to the requirements of the receiving IAESTE Member or Co-operating Institution.

Insurance company:

Insurance receipt No.:

Date (day/month/year):

Signature:

Home address:

E-mail:

Phone number:

Mobile:

IT IS IMPORTANT THAT YOU COMPLETE AND RETURN THIS FORM AS SOON AS POSSIBLE BUT NOT LATER THEN TWO WEEKS BEFORE THE START OF YOUR INTERNSHIP TO YOUR IAESTE NATIONAL OFFICE.



IAESTE GHANA

The International Association for the Exchange of Students for Technical Experience
Kwame Nkrumah University of Science & Technology, Kumasi, Ghana

IAESTE National Committee Ghana

E-mail: iaestegh@yahoo.com

Members Operating in
- 30 Countries in Europe
- 14 in Asia
- 8 in Africa
- 9 in America and
- Australia

Date: 18/04/2017

Dear Trainee,

We are glad you chose Ghana for your IAESTE Training.
Below you'll find some useful information for visa application.

Visa Application

1. You don't need an introductory letter directed to the Embassy. The **N5a** Form is ok for visa application.
2. The visa type: **Others** and specify **Internship/Practical training**. It is advisable to apply for **3 months visa** and extend the period if necessary when you come to Ghana.
3. You will use the **contact details of your employer** and any of following contacts.

Dr. Ebenezer J. D. Belford
Board Member, IAESTE Ghana
Department of Theoretical and Applied Biology, College of Science,
Kwame Nkrumah University of Science and Technology (KNUST)
Kumasi, Ghana.
Cell phone: +233(0)264623525
E-mail: ejdbelford@yahoo.co.uk

Mrs. Maurin Odai
Assistant Registrar, Students Affairs Office
Kwame Nkrumah University of Science and Technology (KNUST)
Cell phone: +233(0)277408262
E-mail: efuaodai@gmail.com

Mr. Raymond Addai
Administrative Secretary/Exchange Coordinator
IAESTE Ghana
Cell phone: +233(0)501383699
E-mail: raychingy1@gmail.com

Hope to meet you soon.

Best Regards,
IAESTE Ghana



IAESTE liability policy

General Arrangements

1. Compliance with the host company/institution directives.

The student will comply with the relevant rules and regulations of the receiving host company/institution while training at the host company/institution.

2. Responsibility for property loss and damage

The student will be responsible for loss of, or damage to the property of his/her receiving company/institution caused by him/herself (malicious intent).

3. Intellectual property rights and confidential information

As a general rule, the receiving company/institution is expected to maintain any intellectual property rights which may result from a particular programme involving the student.

4. Other subjects

The receiving company/institution is expected to agree directly with trainees in writing, on any subjects or specific arrangements other than those listed initially in their offer, if the company/institution considers it necessary.

Waiver of liability

IAESTE (the International Association with its executive bodies, the Members and Co-operating Institutions of the sending and receiving countries) assumes no responsibility or liability for any injury, accident damage, financial losses (for housing reservations....) additional delay or other irregularities suffered by the student, the receiving company./institution or any other party, other than those which may be caused by wilful or negligent acts or omissions on the part of IAESTE, in which case the respective involved party of IAESTE as listed will be solely responsible. IAESTE shall not be responsible or liable for consequences or natural calamities, labour strikes, Acts of God, war and other factors beyond IAESTE's reasonable control.

Insurance

In the light of IAESTE's limitation of liability and responsibility set forth above, the student is obliged to have the necessary arrangements for health and accident coverage for the duration of his/her training, including the time spent travelling and leisure activities. Further coverage must be taken out by the student in relation to his/her property loss and damage.

Offer Reference no. _____

Student Name _____

Signature _____

Date: _____

Please sign and return a copy of this form with the N5b Acceptance document.



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EMERGENCY CONTACT FORM

I _____ (name of student)
agree that this information can be passed on to the hosting IAESTE Committee:
IAESTE _____

Signature of Student: _____

Date: _____

Emergency Contact Numbers (please include International and Area codes):

Main Contact

Name _____

Relationship
to you _____

Home Phone _____

Mobile Phone _____

Business Phone _____

Other Contact

Name _____

Relationship
to you _____

Home Phone _____

Mobile Phone _____

Business Phone _____

Please return **2 copies** of this form along with your N5B and IAESTE Liability Form to your IAESTE **sending** Country. All information will be treated confidentially and will be held for the duration of your traineeship.