

ACCEPTANCE
DOCUMENTS



IAESTE India

LC MUJ

LIDIA RUIZ REVILLA

SPAIN



IAESTE India-LC MUJ

The International Association for Exchange of Students for Technical Experience

Dear LIDIA RUIZ REVILLA,

IAESTE India- LC MUJ congratulates you on being accepted on an internship in India. We hope to make your stay as pleasant as possible in India.

You must make a note of the following points while you are in the process of application for the internship-

1) N5 Documents-

- N5a document is evidence to your 'Confirmation of Acceptance' by IAESTE India- LC MUJ. Please present this 'Acceptance Letter' along with the 'Letter to Embassy' while applying for Visa.
- Send the completed N5b document to your parent IAESTE as soon as possible to facilitate the other formalities.

2) Insurance Liability and Emergency Contacts-

- You must get yourself insured for the duration of your internship. Fill in the required fields and send it along with the N5b document to the parent IAESTE. Also, send the completed 'Emergency Contact' list along with this document.

3) Trainee Form-

- This form is for the records maintained by the Ministry of External Affairs, India. Please attach a copy of your passport to the completed trainee form and send it along with the N5b document to your parent IAESTE.

Looking forward to seeing you in India.

Regards,

Team LC MUJ



International Association for the Exchange of Students for Technical Experience

ACCEPTANCE NOTE

Student: Lidia Ruiz Revilla

Ref. No.: IN-2015-0604MJ

You have been accepted for practical training in
Manipal University Jaipur

Employer: Sourav Kumar Das
Manipal University Jaipur
Phone No: +91 8890951739
Email Id: souravkumar.das@jaipur.manipal.edu

Address:
Manipal University Jaipur
Dehmi Kalan
Jaipur - 302007

Website: www.iaestemuj.in

For the following period (Month / Day / Year) : From 07/30/2015 to 10/22/2015

Student Information:

Passport Number: PAA437944
Date of issue (Month / Day / Year):
Place of issue: Satander, Spain
Valid Until (Month / Day / Year): 03/24/2020
Nationality: Spain

Date of Birth (Month/day/year): 04/24/1988
Place of Birth: Satander, Spain
Gender: Female
Marital status:

CONFIRMATION OF ACCEPTANCE

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

Additional Information:

For any information other than your project details contact headincoming@iaestemuj.in

Phone number: +91 9829303164 (Incoming Reception)

Date (month/day/year):

04/15/2015

National IAESTE Committee

IAESTE INDIA LC MUJ

Signature

Modi Sahiba

(Head Incoming)



International Association for the Exchange Of Students for Technical Experience

CONFIRMATION OF ACCEPTANCE

Student: Lidia Ruiz Revilla

Ref. No. IN-2015-0604MJ

I accept the offer in: INDIA

From (Month / Day / Year) : 07/30/15 to 10/22/15

Employer: Sourav Kumar Das

Manipal University Jaipur

Person to contact: Modi Sahiba (Head Incoming)

Phone number: +919530455193

E-mail: head.incoming@iaestemuj.in

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

Time and date of arrival.....(day/month/year/hr:min)

Place of arrival.....(airport/port/railway station etc.)

Arriving by:

Train No.:.....

Plane: 1st Flight no.....from.....to.....
 2nd Flight no.....from.....to.....
 3rd Flight no.....from.....to.....

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

Lodging will be arranged by IAESTE/myself.....

Optional: I shall depart after completing internship on.....Flight/Bus/Train no.....

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:

For any information other than your project details contact headincoming@iaestemuj.in

Phone Number: +919829303164 (Incoming Reception)

I am insured against illness, accidents including death and repatriation in case of illness, accidents or death during my traineeship. I am aware that neither the IAESTE National Committee of the sending country: _____ nor that of the receiving country: _____ can be held responsible for any accident that may occur during working hours or in my free time.

Insurance company: _____

Insurance receipt No.: _____

Date (day/month/year):

Signature:

Home address:

E-mail:

Phone number:

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 India- LC MUJ

The International Association for Exchange of Students for Technical Experience

TRAINEE FORM

(To be returned at least two weeks before your arrival in India)

Name:

Sex:

Nationality:

University (name of the university/institute the trainee is studying in):

.....
.....

Address of university:

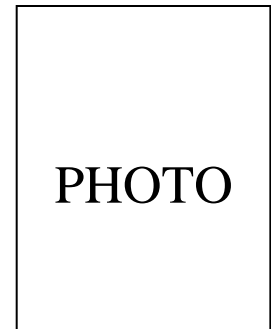
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Department/specialization:.....

Passport Number:

Period of internship:.....

Visa Application to:



Date :


Signature:

Please attach a copy of your passport and return this form along with the N5b document.

COVENANT

TO THE EMPLOYER AND IAESTE INDIA- LC MUJ

- My entry to India is for participation in the IAESTE Exchange programme. I understand the aim of IAESTE activities and will do my best to promote international amity and to enhance my technical knowledge.
- I will observe Indian laws and regulations and also respect Indian customs. I will not engage myself in any immoral and criminal activities. I acknowledge that neither my employer nor IAESTE India- LC MUJ will be responsible for any avoidable incident that is a result of an act of recklessness.
- In an unfortunate event that I am involved in an incident of such a nature, IAESTE India- LC MUJ will provide the necessary humanitarian aid, but neither IAESTE India- LC MUJ nor the employer will be liable for expenses incurred.
- During my training programme I will observe the directions of the employer. I will maintain the confidentiality of work done if directed to do so by the employer.
- I confirm that I will take prior permission from the employer and the Head of Incoming Welfare of IAESTE India- LC MUJ if I leave my training and intend to go for a trip.
- I fully understand that neither IAESTE India- LC MUJ nor the employer is responsible for any accidents during my private time resulting from swimming / diving in hazardous areas and other activities. In the event of a serious incident, IAESTE India- LC MUJ will report the matter to the related diplomatic establishment in India and / or the IAESTE office of the sending country. IAESTE India- LC MUJ will take no further action in this regard.
- I shall take prior approval of the employer and the Head of Incoming Welfare before leaving the city. Any violation in this regard will be severely dealt with.
- I am informed that the stipend paid shall be according to the number of days I report to my employer.
- The internship will be considered completed only after the submission of a technical report to the employer.
- I shall abide by the rules and regulations of MUJ University.



Lidia Ruiz Revilla

Modi Sahiba
HEAD INCOMING
IAESTE LC MUJ



IAESTE India MUJ

The International Association for Exchange of Students for Technical Experience

FINANCIAL SUPPORT LETTER

Embassy of India,

Santander, Spain

04/15/2015(mm/dd/yyyy)

Sir/Madam,

Subject– Invitation and Financial Aid for Ms. **Lidia Ruiz Revilla**

This letter serves to certify that Ms. **Lidia Ruiz Revilla** from **UNIVERSITY OF CANTABRIA** has been accepted as an apprentice in Manipal University Jaipur from (month/day/year) 07/30/2015 to 10/22/2015.

During her stay here in Manipal University Jaipur she will be provided with free accommodation in the University campus.

Apart from this, she will be paid a monthly stipend of Rs.5000 as pocket expense.

Please process the visa application of Ms **Lidia Ruiz Revilla**.

Yours sincerely,

Digvijay Singh Parmar

President

IAESTE India, LC MUJ



I.A.E.S.T.E. MUJ



IAESTE India MUJ

The International Association for Exchange of Students for Technical Experience

**International Association for the
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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 Insurance Liability Form to your IAESTE **sending** Country. All information will be treated confidentially and will be held for the duration of your traineeship.

