

Payment Voucher

No. : 2314

Dated : 30-Oct-2014

Particulars	Amount
Account : IAESTE, MUJ 2013	5,000.00

Through :

Petty Cash

On Account of :

BEING CASH PAID TO PIETERJAN
DEHAENE FOR IAETE STIPEND FROM 01
OCT 2014 TO 30 OCT 2014 STATEMENT
AS PER ATTACHED

Amount (in words) :

Indian Rupees Five Thousand Only

₹ 5,000.00

Receiver's Signature:



Authorised Signatory

MIGVIJAY L. PARMAR

120301008



Payment Voucher

No 2471

Dated : 14-Nov-2014

Particulars	Amount
Account : IAESTE, MUJ 2013	2,000.00

Through :

Petty Cash

On Account of :

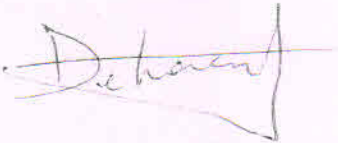
BEING CASH PAID TO PIETERJAN
DEHAENE FOR IAETE STIPEND FROM 01
NOV 2014 TO 12 NOV 2014 STATEMENT
AS PER ATTACHED

Amount (in words) :

Indian Rupees Two Thousand Only

₹ 2,000.00

Receiver's Signature



Authorised Signatory



Divyanshu Aggarwal

CFO

IAESTE MUJ

9660056829



International Association for the Exchange Of Students for Technical Experience

CONFIRMATION OF ACCEPTANCE

Student: Pieterjan Dehaene

Ref. No. IN-2014-3304-MJ

I accept the offer in: INDIA

From (Month / Day / Year) : 10/01/2014 to 11/12/2014

Employer:

Manipal University Jaipur

Person to contact: Mahima Joshi

Phone number: +919829303164

E-mail: mahimajoshi@iaestemuj.in

I shall leave my country on 24/09/2014 (day/month/year)
Time and date of arrival 25/09/2014/07:40 (day/month/year/hr:min)
Place of arrival AIRPORT (DELHI) (airport/port/railway station etc.)
Arriving by:

Train No.:

Plane: 1st Flight no. QR194 from BRUSSELS to DOHA
2nd Flight no. QR564 from DOHA to DELHI
3rd Flight no. / from / to /

I shall require lodging from 1/10/2014 (day/month/year) to 12/11/2014 (day/month/year).
Lodging will be arranged by IAESTE/myself IAESTE

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: BELGIUM nor that of the receiving country: INDIA can be held responsible for any accident that may occur during working hours or in my free time.

Insurance company: KBC

Insurance receipt No.: 79 619 515 05 00

Date (day/month/year): 2/05/2014

Home address: R. SCHUMANSTRAAT 5 8700 TIELT

E-mail: PIETERJANDEHAENE@HOTMAIL.COM / PIETERJAN.DEHAENE@UGENT.BE

Phone number: +32 476 24 39 28

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.