

From MESTE Tunisia





The International Association for the Exchange of Students for Technical Experience
Address: ENIT, BP 37, Le Belvédère. 1002 Tunis Tel: +216 71014430 Fax: +216 70860548
E-mail: contact@iaeste-tunisia.com Website: http://www.iaeste-tunisia.com

IAESTE Tunisia

ACCEPTANCE NOTE

N/5'a

Ref.No.TN-2017-9026-CS

Student Information

Family name: RASTOGI

First and/or other names: Akul

Date of birth: 08/03/1996

Place of birth: Delhi

Gender: Male

Nationality: Indian

Passport no.: N0201904

Has been accepted for practical training at

Employer name: Vermeg

Contact person: Mrs. Chiraz FELLAH

Employer address: Rue du Lac Biwa 1053 Les berges de lac

Phone number: ++216 29 900 446

Email: cfellah@vermeg.com

For the following period: from 08/06/2017 to 23/07/2017

Date:

On behalf of receiving country: IAESTE TUNISIA

Enclosures

- N/5'b
- Emergency Contact Form
- IAESTE Liability Policy
- Employer Approval Letter
- Reception Booklet
- Others forms:

Ref. No. TN-2017-9026-CS

CONFIRMATION OF ACCEPTANCE

I accept the offer as mentioned above.

During my training period I am insured at following company: Bhasti AXA GENERAL

59821829

Insurance receipt no:

Disclaimer

 I am aware that I am responsible for any financial loss involved if I, IAESTE or the employer withdraw or change my start date or cancel any room allocated to me after I have confirmed my acceptance.

 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 IAESTE Receiving Country.

Date:

7th May 2017

Student's signature:





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IAESTE Tunisia

N/5-b: TN-2017-9026-CS

	CONFIRMATION	OF ACCEPTANCE	-
lent: Akul RASTOGI			

Stude

You have been accepted for practical training in:

Employer: Vermeg

Address: Rue du Lac Biwa 1053 Les berges de lac

Person to contact: Mrs. Chiraz FELLAH

Phone number: +216 29 900 446

E-mail: cfellah@vermeg.com For the following period:

From 08/06/2017 to 23/07/2017

	I shall leave my country on: 23 MAY 2017
	Place of arrival: TUNIS, TUNISIA - CARTHAGE Coming from: UTENEVA, WILZER
	Place of arrival: 10NIS, TUNISIA - CARTHAGE Coming from: GENEVA, SWITZER I shall require lodging from 6 JUNE 2014 to 24 JULY 2017 I shall require lodging from 6 JUNE 2014 TARSTE TUNISIA
	I will arrange lodging by myself (yes/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.
_	Lam aware that both, IAESTE Tunisia and the IAESTE National Committee of the sending
	country: INDIAcannot be held responsible for any accident that may occur during
	working hours or in my time free.
_	I am insured against illness, liability, accidents including death and repatriation in case of
	am insured against liness, liability, accidents including death and reput attention in ease of
	illness, accidents or death during my traineeship according to the requirements of the
	receiving IAESTE Member or Co-operating Institution.
	Insurance company: BHARTI AXA GENERAL
	Insurance receipt No.: S982 1829
	Insurance receipt No.:
2013	Date: 7 MAY 2017 Date: 7 MAY 2017 COLONY GUAZIARAD 201011 119-
	Date:
	Home Address: 10 192@grail.com Signature: Okul.
	Date: T1777 2010 D-92 RAMPRASTHA COLONY, GHAZIABAD 201011, UP-Home Address: D-92 RAMPRASTHA COLONY, GHAZIABAD 201011, UP-HOME ADDRESS HOME ADDRESS
_	Phone number.
	THE PROPERTY OF THE PROPERTY O

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.

International Association for the Exchange of Students for Technical Experience - IAESTE a.s.b.l. 51, rue Albert 1er, L-1117 Luxembourg / R.C.S. Luxembourg F1180



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Réf: TN-2017-....

EMPLOYER APPROVAL LETTER

Tunis, 02 Year 2017

I, Hayldom Hsaini	(Supervisor)
	(Company/Organization)
hereby agree to supervise the student AKUR Mash	(Name of the
trainee) from $08/06/2017$ to $23/07/$	12017
and pay the trainee the following wage during training: 100 Tu	
Very truly yours,	
Mrs Philas Follal Recuirment und	Inkinship ARON
(Official responsible)	(
Verme	
(Firm's name and address)	
Rue Lu La Giva 1053 Les Rengs 1	w loc Tonisia
(Email address)	
Maka verma g. com	
(Telephone Number)	
00216 71 160 G00	
(Signature / Stamp)	
VERME CO LOS MONICOS AND LOS MONICOS CONTRACTOR AND LOS MONICOS CONTRACTOR AND LOS CONTRA	



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EMERGENCY CONTACT FORM

I agree to furnish full details of any medical condition, allergies, medication, or special requirements that I currently have.				
Details of Medical Condition/Medication/Allergies or other condition:				
AKUL RASTOGI	(name of student) agree			
that this information can be passed on to the IAESTETUNISIA	hosting IAESTE Committee:			
Signature of Student: Okul. Date: 7 MAY 2017				
	se include International and Area codes):			
Main Contact	Other Contact			
Name SANJAY RASTOCI	Name SHALINI RASTOGI			
Relationship to you FATHER	Relationship to you MOTHER			
Home Phone 0911204135319	Home Phone +91120 4135319			
Mobile Phone +91 9810154015	Mobile Phone + 91 9311154016			
Business Phone +91983111540 IS	Business Phone +91 9810806735			

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



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/her (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, damage, financial losses (for housing reservations....) additional delay or other irregularities suffered by the student, the 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.

* (A.E.S.T.E.)
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