

प्रेषक

प्रादेशिक सचिव
भारत स्काउट्स एवं गाइड्स उत्तराखण्ड

प्रेषित

जिला मुख्यायुक्त एवं मुख्य शिक्षा अधिकारी
जनपद -अल्मोड़ा / नैनीताल / पिथौरागढ़ / बागेश्वर / चम्पावत / उधमसिंह नगर /
देहरादून / हरिद्वार / पौड़ी / चमोली / रुद्रप्रयाग / टिहरी / उत्तरकाशी / शान्तिकुंज
अन्तर्राष्ट्रीय कार्यक्रम जनपदों को प्रेषित किये जाने विषयक।

विषय-
महोदय,

उपरोक्त विषयक के सम्बन्ध में सूच्य है कि राष्ट्रीय मुख्यालय से विभिन्न अन्तर्राष्ट्रीय कार्यक्रम प्राप्त हुये है, जो पत्र के साथ संलग्न कर आपको प्रेषित किये जा रहे है। कृपया अपने जनपद के विद्यालयों/महाविद्यालयों से अर्ह प्रतिभागी जो संलग्न पत्र से सम्बन्धित सभी औपचारिकताओं को पूर्ण करते हो, उन्हें राष्ट्रीय मुख्यालय के पत्र में दी गई तिथिनुसार प्रतिभाग किया जाना है। अन्तर्राष्ट्रीय कार्यक्रमों का विवरण निम्नवत है-

S.No	Circular No	Date	Subject
1	266/2023	18/12/2023	Red Rose International Jamboree -In The United Kingdom in 2024
2	268/2023	18/12/2023	Nomination for a Short Term Invitation Programme Under Jenesys 2023 -Japan

अतः उक्त के सम्बन्ध में अनुरोध है कि अपने जनपद से अर्ह प्रतिभागियों को प्रतिभाग कराने हेतु सम्बन्धित को निदेशित करने का कष्ट करेंगे। प्रतिभागियों का चयन "First Come First Serve"के आधार पर किया जायेगा।

संलग्न -राष्ट्रीय मुख्यालय से प्राप्त पत्रों की छायाप्रति ।

"Creating Better Uttarakhand"

एवं "स्काउट भावनाओं के साथ"

भुवदीय
(रवीन्द्र मोहन काला)
प्रादेशिक सचिव

पृष्ठाकन सं0 / उ0भा0स्का0गा0 / प्रा0मु0 /

/ 2023-24

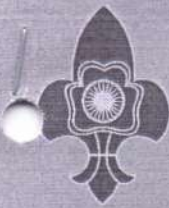
दिनांक उक्तवत

प्रतिलिपि सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित -

- 1-प्रादेशिक मुख्यायुक्त,भारत स्काउट्स/गाइड्स उत्तराखण्ड एवं निदेशक,माध्यमिक शिक्षा उत्तराखण्ड।
- 2-प्रादेशिक आयुक्त (स्का0) भारत स्काउट्स एवं गाइड्स उत्तराखण्ड एवं संयुक्त निदेशक,प्रारम्भिक शिक्षा उत्तराखण्ड।
- 3-प्रादेशिक आयुक्त (गा0) भारत स्काउट्स एवं गाइड्स उत्तराखण्ड एवं निदेशक,आकदमिक शोध संस्थान एवं प्रशिक्षण उत्तराखण्ड।
- 4-रीजनल आफिसर, सी0बी0एस0ई0, रीजनल ऑफिस,कोलागढ़ रोड़,देहरादून ।
- 5-निदेशक,उच्च शिक्षा, नवाबी रोड़,हल्द्वानी,नैनीताल।
- 6-संयुक्त निदेशक,उच्च शिक्षा,क्षेत्रीय कार्यालय,,देहरादून।
- 7-प्रादेशिक संगठन आयुक्त (स्का0/गा0) भारत स्काउट्स एवं गाइड्स उत्तराखण्ड।
- 8-प्राचार्य/प्राचार्या,समस्त महाविद्यालय (कुमाऊ एवं गढ़वाल मण्डल)को आवश्यक कार्यवाही हेतु प्रेषित।
- 9-समस्त जिला सचिव,भारत स्काउट्स एवं गाइड्स उत्तराखण्ड को आवश्यक कार्यवाही हेतु प्रेषित।

(रवीन्द्र मोहन काला)
प्रादेशिक सचिव





The Bharat Scouts and Guides

Creating Better India

National Headquarters

Address: Lakshmi Mazumdar Bhawan, 16, M. G. Marg, I. P. Estate, New Delhi-110002

Website :www.bsgindia.org Email Id: info@bsgindia.org Phones:+91-11-23370126,23378667

67/2023
18/12/2023

To
All the State Secretaries,
State Associations of
The Bharat Scouts and Guides,
INDIAN UNION



Circular No.: 266 / 2023
Date : 18th Dec., 2023

SUB: RED ROSE INTERNATIONAL JAMBOREE - IN THE UNITED KINGDOM IN 2024.

Dear Sir/Madam,

Greetings from the Bharat Scouts and Guides, National Headquarters!

We are glad to inform you that the **Red Rose International Jamboree** is going to be organised by West Lancs District from 3rd to 10th August 2024 at Westmorland Showground in the United Kingdom. It offers opportunity for Scouts and Guides from across the globe to join together and make memories to last a lifetime. This Jamboree is hosted in the heart of the iconic Lake District in the north west of England.

The programme will consist of adventurous activities, traditional skills, impact of the sustainable development goals, to learn about other Cultures and many more with opportunities to meet other Scouts and Guides from all around the world.

Red Rose International Jamboree is open to all Scouts, and Guides between the ages of 10 years to 17 years. Those over the age of 18 are welcome as members of International service team.

The event details are as follows:

Name of the Event	: Red Rose International Jamboree
Date	: 3rd - 10th August, 2024
Venue	: Westmorland Showground, Lane Farm, Crooklands, Milnthorpe, Cumbria, LA7 7NH, United Kingdom.
Who can participate	: A Group of 08 Scouts or 08 Guides between the ages of 10 years to 17 years with Unit Leader.
Event Fee	: For Scouts/Guides- £265 per head - INR 28,000/- (Approximately) For Unit Leaders- £95 per head - INR 10,000/- (Approximately) to covers for Accommodation and programme activities. Transportation and Meals (Food) cost is not included in the Event Fee.

Airfare & VISA Charges	: Airfare - INR 93,000/- per head by the participants (approximate). VISA & Travel Insurance - INR 15,000/- per head by the participants (approximate).
Contribution towards Scout/Guide Welfare Fund	: Rs. 5,000/- (Non-refundable) - As per Circular No. 110/2023) dated 06 th July 2023. Caution Money is to be remitted through the following link under International events. https://www.onlinesbi.sbi/sbicollect/icollecthome.htm?corpID=2784356
Last date of submission	: "Limited seats are available" Kindly send the duly filled application forms with district/state endorsement to waggs@bsgindia.org on or before 18th January, 2024.

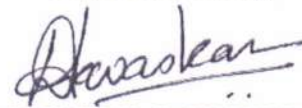
More information regarding the event will be provided along with selection letter.

State Associations are requested to circulate these opportunities within their States/ Districts for interested members to apply.

For any queries feel free to contact the undersigned on +917666392611.

Thanking you with regards,

Yours sincerely,



(DARSHANA PAWASKAR)
JOINT DIRECTOR OF GUIDES
(PROGRAMME AND TRAINING)

Orj
Circulate to all
Compile & Forward to NHQ
with in a state to NHQ
Admin
18/12/2023

Encl.: International Application Form

Copy to:-

1. All the NHQ Office Bearers of the Bharat Scouts and Guides, National Headquarters.
2. Chairman/Secretary, Railway Scout and Guide Board, Rail Bhawan, New Delhi.
3. The Commissioner, Kendriya Vidyalaya Sangathan, 18 Institutional Area, Shahid Jeet Singh Marg, New Delhi - 110016.
4. The Commissioner, Navadaya Vidyalaya Samiti, Institutional Area, B-15, Sector - 62, Noida, Uttar Pradesh - 201309.
5. The Director, DAV
6. All the District Secretaries, District Association of Dammam, Riyadh, Muscat and Jamiat Youth Club.
7. All Assistant Director, Bharat Scouts and Guides for follow-up.



The Bharat Scouts and Guides, National Headquarters

Lakshmi Mazumdar Bhawan, 16 M.G. Marg, I.P. Estate, New Delhi – 110002.

Passport
Size Photo

APPLICATION FOR PARTICIPATION IN INTERNATIONAL EVENTS

BSG UID No.

Note: Fill the application form in Capital letters.

Name of State Association							
Name of the Event							
Date of Event:		Place:			Country:		
Name in full as in passport							
Date of Birth:	Place of Birth		Height:	Weight:	Age:	Married / Unmarried	
Nationality:			Educational Qualification:				
Passport Details:							
Surname		Given Name					
Passport No:		Date of Issue:		Valid Till:		Place of Issue:	
Full Residential Address:							
		State : _____			Pincode : _____		
STD Code	Telephone No		Mobile No		Fax No		
Email ID:							
Name of Scout/Guide Group:							
Father's / Guardian's Name							
Income							
Occupation							
Date when joined the organisation							
Rank in the Organisation							
Experience in the Organisation							
Scout / Guide Qualification							
Training Level up to HWB/ALT/LT							
Any other qualifications							
Proficiency in Languages		a) Spoken Only : _____ b) Spoken as well as written : _____					

Food Habits	Vegetarian: _____ Non-Vegetarian: _____
Have you taken part in any National / International Conference / Events?	
If Yes give, Details	
Any other activities, please give details with attested copies of documents	
Who will bear your expenses?	(Please attach a certificate to that effect)

DECLARATION

I understand the nature and purpose of the event for which I am applying, and (if selected) will assume responsibility for following all the discipline directions and for carrying out my obligations before during and after the event.

I will share the event as widely as possible with my District and State. I will ensure that the knowledge and skill gained from the event to promote and stimulate further interest in the Scout/Guide programme wherever possible.

(Counter Signature of Parent/Guardian)

Date: _____

(Signature of the Applicant)

Date: _____

Strongly recommended, School has No Objection in his participation in the event.

(Signature of Head of the Institution)

Date: _____

(Signature of the Dist. Commissioner (S/G))

Date: _____

RECOMMENDATION OF THE STATE

Recommended:

Signature of the State Org. Commissioner (S/G)

Date: _____

Signature of the State Commissioner (S/G)

Date: _____

Signature of the State Chief Commissioner

Date: _____

Checked and forwarded to National Headquarters along with Caution Money of Rs. _____/- (Not refundable if selected and not participated)

(Rupees _____ Only)

Cash / Cheque / D.D. No. _____

Date: _____

Signature of State Secretary / Jt. State Secretary

CERTIFICATE BY THE PRINCIPAL ON SCHOOL PAD (LETTER HEAD)

It is hereby certified that Mr. / Miss. _____
Son/Daughter of Mr. _____ is a bonafide student of this school
studying in class _____ He / She has applied for participation in the International Event (Name of the
Event and Country) _____ on dates: _____
to _____. His / Her request for participation is recommended and the school has no objection to his / her
participation.

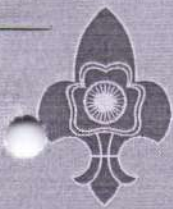
Dated: _____

Signature of the Principal
With name & seal of the Institution

Instructions for the applicants who apply for the International Events/Conferences:

Compulsory documents to be attached with this application:

1. Duly filled application recommended by the State Association.
2. Passport Photo 5 Nos (with White Background)
3. Demand Draft of Rs.5000/- (Rupees Five Thousand only) as caution money non refundable if selected and not participated and also if application is received without proper documents or any invalid data's. (Demand Draft in favour of **Director, Bharat Scouts and Guides** payable at **New Delhi**)
4. **NO OBJECTION CERTIFICATE** from Head of the institution for School / College children, Head of the company and **SERVICE CERTIFICATE** in case of working applicants.
5. IT returns file statement of last 3 years. Photocopy has to be attached.
6. Photocopy of the Valid Passport atleast 8 months after the date of the event which you are willing to attend.
7. Bank statement for the last 6 months.



The Bharat Scouts and Guides

Creating Better India

675/2023
19/12/2022

National Headquarters

Address: Lakshmi Mazumdar Bhawan, 16, M. G. Marg, I. P. Estate, New Delhi-110002

Website :www.bsgindia.org Email Id: info@bsgindia.org Phones:+91-11-23378702,23378667

To
All the State Secretaries,
State Associations of
The Bharat Scouts and Guides,
INDIAN UNION



Circular No.: 268 / 2023
Date : 18th Dec. 2023

SPONSORSHIP PROGRAMME – Last date of Application 22/12/2023

SUB: NOMINATION FOR A SHORT TERM INVITATION PROGRAMME UNDER JENESYS2023 - JAPAN

Dear Sir/Madam,

We are pleased to inform you that the Ministry of External Affairs, Government of India, New Delhi has invited the Bharat Scouts and Guides to nominate participants in the Japan-East Asia Network of Exchange for Students and Youths (JENESYS) programme conducted by Government of Japan with the objective to promote mutual trust and understanding among people of Japan and SAARC countries and building a basis for future friendship and cooperation. The details of the event are as under:

Name	:	Japan-East Asia Network of Exchange for Students and Youths (JENESYS)
Date	:	06 th to 13 th February 2024
Venue	:	Tokyo, JAPAN
Theme	:	Agriculture
Objective	:	The objective is to strengthen cooperation and human linkages between Japan and SAARC countries by deepening knowledge of Japanese initiatives and case studies through lectures, exchange of views and observation/experience opportunities in Japan.
Who can apply & Eligibility Criteria	:	<ol style="list-style-type: none"> 1. Scouts/Guides/Rovers/Rangers and Adult Leaders who are 15-35 years old as of the programme date. 2. Candidate must be a High school or Undergraduate or graduate. 3. Studying subjects related to Agriculture Cooperation or having strong interest in issues related to the field of Agriculture and possessing adequate English conversation skills. 4. Having BSG UID No.

Contribution towards Scout/Guide welfare fund	:	Rs. 5000/- Non-refundable is to be remitted through the following link https://www.onlinesbi.sbi/sbicollect/icollecthome.htm?corpID=2784356 under International events
Program Overview	:	<p>Online Pre-Exchange Program</p> <p>Date: 30/01/2024</p> <p>Time: 12.30 PM – 2.30 PM</p> <p>Program Type: Online program with Zoom</p> <p>Contents: Program Orientation/Lecture of Japan. Detailed information will be sent to participants in due course.</p> <p>Inbound Programme: Date February, 6 2024 – February, 13 2024 06-02-2024 - The date of the arrival in Japan 13-02-2024 - The date of the departure from Japan Place: Tokyo, other local area</p>
Financial Support	:	<p>Selected participants will be funded by the Government as under:</p> <ul style="list-style-type: none"> ➤ Participants will be provided airfare, overseas travel insurance, local accommodation, transportation, meals and admission fee (as applicable) under the programme from 06-13 February, 2024.
Expenses to be borne by the participants, if any	:	<p>Travel between the participant's home and the designated airport. Any excess baggage fees incurred during the program shall be paid by the participant. It is not allowed to change the designated flight or class even if the participant pays the cost.</p> <p>Any costs for vaccination and/or other medical documents are not covered by the program.</p> <p>Please Note:</p> <p>If a participant chooses to drop out of the program for reasons other than a medical emergency or a family funeral, the participants/his/her State Association shall be fully responsible for any costs associated with this cancellation. The cancellation fees will be charged to the participant if their application have already been accepted and the flight and/or other bookings are completed.</p>
Last Date of Application	:	The application of the participants should reach to National Headquarters, New Delhi on or before

	<p>22/12/2023 along with photocopy of valid passport (passport validity should be at least upto June, 2024. Scanned copy of the deposit/pay-in-slip is to be attached with the application form to authenticate the transfer of caution money. Following documents (enclosed herewith) is also to be filled and submitted by the candidate:</p> <ol style="list-style-type: none">1. Letter of Understanding2. VISA application form
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Since, this is fully sponsored programme, selection of candidate will be considered on Merit. If required, online interview will be called by the Bharat Scouts and Guides, National Headquarters. NHQ reserves all right to select and nominate the deserving candidate to represent India in this prestigious event.

State Association is requested to immediately recommend the name of a suitable candidate along with all the requisite documents and cope with the opportunity and provide chance to the deserving candidate.

Late applications will not be entertained after the deadline.

Thanking you,

Yours in Scouting/Guiding,



(AMAR B. CHETTRI)

JT. DIRECTOR OF SCOUTS (PROG. & TRG.)

Encl: 1. Application form

2. Letter of Understanding

3. VISA application form

Copy to:-

1. All the NHQ Office Bearers of the Bharat Scouts and Guides, National Headquarters.
2. Chairman/Secretary, Railway Scout and Guide Board, Rail Bhawan, New Delhi.
3. The Commissioner, Kendriya Vidyalaya Sangathan, 18 Institutional Area, Shahid Jeet Singh Marg, New Delhi - 110016.
4. The Commissioner, Navadaya Vidyalaya Samiti, Institutional Area, B-15, Sector - 62, Noida, Uttar Pradesh - 201309.
5. The Director, DAV
6. All the District Secretaries, District Association of Dammam, Riyadh, Muscat and Jamiat Youth Club.



The Bharat Scouts and Guides, National Headquarters

Lakshmi Mazumdar Bhawan, 16 M.G. Marg, I.P. Estate, New Delhi – 110002.

Passport
Size Photo

APPLICATION FOR PARTICIPATION IN INTERNATIONAL EVENTS

BSG UID No.

Note: Fill the application form in Capital letters.

Name of State Association							
Name of the Event							
Date of Event:		Place:			Country:		
Name in full as in passport							
Date of Birth:	Place of Birth	Height:	Weight:	Age:	Married / Unmarried		
Nationality:			Educational Qualification:				
Passport Details:							
Surname			Given Name				
Passport No:	Date of Issue:	Valid Till:		Place of Issue:			
Full Residential Address:							
State : _____ Pincode : _____							
STD Code	Telephone No	Mobile No		Fax No			
Email ID:							
Name of Scout/Guide Group:							
Father's / Guardian's Name							
Income							
Occupation							
Date when joined the organisation							
Rank in the Organisation							
Experience in the Organisation							
Scout / Guide Qualification							
Training Level up to HWB/ALT/LT							
Any other qualifications							
Proficiency in Languages							
a) Spoken Only : _____							
b) Spoken as well as written : _____							

Food Habits	Vegetarian: _____	Non-Vegetarian: _____
Have you taken part in any National / International Conference / Events?		
If Yes give, Details		
Any other activities, please give details with attested copies of documents		
Who will bear your expenses?	(Please attach a certificate to that effect)	

DECLARATION

I understand the nature and purpose of the event for which I am applying, and (if selected) will assume responsibility for following all the discipline directions and for carrying out my obligations before during and after the event.

I will share the event as widely as possible with my District and State. I will ensure that the knowledge and skill gained from the event to promote and stimulate further interest in the Scout/Guide programme wherever possible.

(Counter Signature of Parent/Guardian)

Date: _____

(Signature of the Applicant)

Date: _____

Strongly recommended, School has No Objection in his participation in the event.

(Signature of Head of the Institution)

Date: _____

(Signature of the Dist. Commissioner (S/G))

Date: _____

RECOMMENDATION OF THE STATE

Recommended:

Signature of the State Org. Commissioner (S/G)

Date: _____

Signature of the State Commissioner (S/G)

Date: _____

Signature of the State Chief Commissioner

Date: _____

Checked and forwarded to National Headquarters along with Caution Money of Rs. _____/- (Not refundable if selected and not participated)

(Rupees _____ Only)

Cash / Cheque / D.D. No. _____

Date: _____

Signature of State Secretary / Jt. State Secretary

JENESYS SAARC Letter of Understanding

In agreeing to participate in *Japan's Friendship Ties Programs, JENESYS ASEAN Inbound Program* (hereafter referred to as "the Program") promoted by the Ministry of Foreign Affairs, I agree and consent to the following terms and conditions as determined by the Japan International Cooperation Center (JICE) (hereinafter collectively referred to as "the Program Organizers").

1. Infectious disease related points for the Program

To prevent the spread of infectious disease infection, I fully understand and accept the following regulations and measures:

<Prior entry into Japan>

- I understand that I am responsible for the costs needed to acquire an infectious disease test certificate or vaccination certificate before leaving for Japan or returning from Japan.
- For 14 days before entry into Japan, I will try to reduce close contact with others as much as possible, and I will wear a mask when attending gatherings such as parties/dinners.

<During the Program period in Japan in general>

- I will take the following actions to prevent the spread of infection:
(1) Wear a mask when requested, (2) Wash my hands thoroughly, (3) Avoid closed spaces, crowded spaces, and close-contact settings (the "three Cs").
- I will follow the instructions given by the Program Organizers who will accompany me during my stay in Japan.
- I understand that the Program Organizers will accompany me throughout the Program and that I must remain with the group at all times.
- The Program Organizers will give me detailed instructions on when to wear a mask and when I can take it off, and I will abide by these instructions.

<During the Program period in Japan if I develop symptoms>

- In case I develop symptoms or I become a close contact person of any positive cases during the time period of the Program, I will immediately report to the Program Organizers and I will follow the directions from Organizers or related institutions.
- I understand that if I infect with an infectious disease or become a close contact person feeling not well, during the Program, I can stop participating in the Program as soon as possible and will be placed in self-isolation in accordance with the instructions given by Organizer or related institutions. I also understand that your return date may be extended by several days to 1 week depending on the symptoms.

2. General points for the Program

- I am fully responsible for arranging and paying for travel between my residence and the airport of origin designated by the Program.

- I am fully responsible for any and all costs associated with cancellations or changes in travel arrangements that I initiate. Such costs may include, but are not limited to, international flights, domestic transportation, and accommodations. I understand I must pay the costs immediately upon demand, in accordance with the instructions provided by the Program Organizers. Exceptions may be made in the case of a medical or other emergency including testing positive for infectious disease, upon presentation of a medical certificate and/or other documentation, and at the discretion of the Program Organizers.
- The Program Organizers reserve the right to change or alter the itinerary, transportation, accommodation, or any other arrangements without notice due to the reasons such as weather, conditions of infection in the venue of the program, or the safety management.
- The Program Organizers, associated subcontractors and cooperative organizations, including their staff and employees, are not and will not be held liable for any injury, accident, illness, loss or damage to personal property, or other contingencies, which may occur during or in connection with my participation in the Program, and are released from any and all claims, liabilities, actions and causes of action against them, except in the case of gross negligence or wilful misconduct.
- The Program Organizers, associated subcontractors and cooperative organizations, including their staff and employees, will not be held liable for any actions or negligence by any third parties including, but not limited to, commercial airlines, railroads, chartered bus providers, hotels, and restaurants.
- Costs that are not explicitly included in the Program are my own responsibility. Any and all costs I incur during or in connection with the Program are my own responsibility including, but not limited to, expenses for medical/dental treatment, replacement of a lost passport or personal articles, or other personal expenditures (e.g., personal purchase, telephone or internet charges), except for those covered by the travel insurance provided by the Program Organizers. I understand I must immediately pay these expenses myself when necessary.
- I understand I must participate in all scheduled activities in the official program, and that missing lectures, meetings, visits, meals or any fixed programming is not permitted for any reason, including professional or academic opportunities or obligations, or a personal preference for other activities. I am fully responsible for any costs associated with missing elements of the official program. Such costs may include, but are not limited to, admission fees, prepaid meal costs, domestic transportation or accommodations, or international flights. I understand I must immediately reimburse the Program Organizers for these costs upon demand in accordance with the instructions they provide.
- I must abide by and adhere to my country and Japanese laws and regulations, and follow the instructions and rules given by the Program Organizers and their agents throughout the Program. I agree to comply with instructions provided by the Program Organizers which may not be required by law, but which the Program Organizers determine to be necessary for the safety and wellbeing of myself and others.
- The Program Organizers may remove me from the Program at any time for reasons they deem appropriate and necessary, including, but not limited to, my violation of the Terms and Conditions or this Letter of Understanding, or my attitude or behavior. I am fully responsible for the expenses incurred for such removal and I will pay the expenses immediately upon demand in accordance with the instructions provided by the Program Organizers.
- I understand that no one, including family or friends, is allowed to accompany me or my group in the Program even if he/she pays the travel costs by himself/herself.

- I understand that my name, pictures and recordings of me taken during the Program and associated events may be used for reporting purposes, on the Program Organizers' websites and social media feeds, in promotional materials related to the Program, or in meetings.
- I understand that I may be contacted by the Program Organizers following my participation in the Program with relation to activities associated with the Program including, but not limited to, JENESYS ASEAN alumni events.

<Two points for infectious disease prevention>

1. You are highly recommended to take the following actions for prevention of infectious disease.

- (a) Wear masks when requested *Organizer may ask to wear a mask depending on the institutions you visit.
- (b) Wash hands thoroughly
- (c) Avoid closed spaces, crowded spaces, and close-contact setting (the "three Cs").



2. You are required to be placed in self-isolation in case of infection with some infectious diseases during the Program.

- (a) You are required to stop participating in the Program
- (b) You are required to stay at the accommodation for being placed in self-isolation.
- (c) Your return date may be extended by several days to 1 week depending on the symptoms.

* Even if you are not infected, the program may be canceled or changed if a group member becomes infected

- ※ If you violate the prevention measures required on this Letter of Understanding, your name and nationality may be publicly disclosed, and you may be subject to detention. (Foreign nationals may also be subject to revocation of status of residence and deportation procedures.)
- ※ Please respond in good faith to any communication or inquiry from the relevant authorities regarding compliance with the Letter of Understanding.
- ※ Many other matters are covered in the Letter of Understanding. Please read it carefully.

By signing this Letter of Understanding, I agree to participate in JENESYS SAARC and certify that I have read and understand and consent to all of the foregoing.

Print Name of Participant

Signature of Participant

Date

VISA APPLICATION FORM TO ENTER JAPAN

*Official use only

(Paste photo here)
45mm x35mm
or 2in x 1.4in

Surname (as shown in passport) _____

Given and middle names (as shown in passport) _____

Other names (including any other names you are or have been known by)

Date of birth _____ Place of birth _____
(Day)/(Month)/(Year) (City) (State or Province) (Country)

Sex: Male Female Marital status: Single Married Widowed Divorced

Nationality or citizenship _____

Former and/or other nationalities or citizenships _____

ID No. issued to you by your government _____

Passport type: Diplomatic Official Ordinary Other Passport No. _____

Place of issue _____ Date of issue _____

Issuing authority _____ Date of expiry _____
(Day)/(Month)/(Year) (Day)/(Month)/(Year)

Purpose of visit to Japan _____

Intended length of stay in Japan _____

Date of arrival in Japan _____

Port of entry into Japan _____ Name of ship or airline _____

Names and addresses of hotels or persons with whom applicant intends to stay

Name _____ Tel. _____

Address _____

Dates and duration of previous stays in Japan _____

Your current residential address (if you have more than one address, please list them all)

Address _____

Tel. _____ Mobile No. _____

E-Mail _____

Current profession or occupation and position _____

Name and address of employer

Name _____ Tel. _____

Address _____

*Partner's profession/occupation (or that of parents if applicant is a minor):

Guarantor or reference in Japan(Please provide details of the guarantor or the person to be visited in Japan)

Name _____ Tel. _____

Address _____

Date of birth _____ Sex: Male Female

(Day)/(Month)/(Year)
Relationship to applicant _____

Profession or occupation and position _____

Nationality and immigration status _____

Inviter in Japan(Please write 'same as above' if the inviting person and the guarantor are the same)

Name _____ Tel. _____

Address _____

Date of birth _____ Sex: Male Female

(Day)/(Month)/(Year)
Relationship to applicant _____

Profession or occupation and position _____

Nationality and immigration status _____

*Remarks/Special circumstances, if any _____

Have you ever:

- been convicted of a crime or offence in any country? Yes No
- been sentenced to imprisonment for 1 year or more in any country? ** Yes No
- been deported or removed from Japan or any country for overstaying your visa or violating any law or regulation? Yes No
- been convicted and sentenced for a drug offence in any country in violation of law concerning narcotics, marijuana, opium, stimulants or psychotropic substances? ** Yes No
- engaged in prostitution, or in the intermediation or solicitation of a prostitute for other persons, or in the provision of a place for prostitution, or any other activity directly connected to prostitution? Yes No
- committed trafficking in persons or incited or aided another to commit such an offence? Yes No

** Please tick "Yes" if you have received any sentence, even if the sentence was suspended.

If you answered "Yes" to any of the above questions, please provide relevant details.

"I hereby declare that the statement given above is true and correct. I understand that immigration status and period of stay to be granted are decided by the Japanese immigration authorities upon my arrival. I understand that possession of a visa does not entitle the bearer to enter Japan upon arrival at port of entry if he or she is found inadmissible."

"I hereby consent to the provision of my personal information (by an accredited travel agent, within its capacity of representing my visa application) to the Japanese embassy/consulate-general and (entrust the agent with) the payment of my visa fee to the Japanese embassy/consulate-general, when such payment is necessary."

Date of application _____
(Day)/(Month)/(Year)

Signature of applicant Jaro Yamada

* It is not mandatory to complete these items.

Any personal information gathered in this application as well as additional information submitted for the visa application (hereinafter referred to as "Retained Personal Information") will be handled appropriately in accordance with the Act on the Protection of Personal Information Held by Administrative Organs (Act No. 58 of 2003, hereinafter, "the Act"). Retained Personal Information will only be used for the purpose of processing the visa application and to the extent necessary for the purposes stated in Article 8 of the Act.