



## Rules and regulations

- Students must present their government-issued ID card (Aadhaar) at check-in time.
- Students should come in proper school uniform and must wear an ID card.
- Students must remain on campus during the program.
- Maintain discipline during campus movements.
- Students should attend morning sessions in school uniforms.
- Students have to report on-time according to the program schedule provided at the entry.
- Students must keep their mobile phones at the hostel.
- Teachers should keep their mobiles turned off during the sessions.
- Program videos & photographs will be available to you on the website.
- Students & teachers are advised to ensure the safety of their belongings. Do not bring any valuable items. IIT Bombay will not be held liable for any lost items.
- Documents to keep for security reasons:
  - a. School ID card
  - b. Aadhaar card
  - c. Teacher's phone number
  - d. Copy of doctor's prescription (if any)
- Students are expected to respect the property of the IIT Bombay campus.
- Students are always advised to ensure cleanliness and not litter anywhere on the campus premises or outside. They must use the dustbins provided.
- Outside Guests are not permitted to enter IITB campus during the program.
- Photography/video/audio recording during the program are strictly prohibited.
- Students must respect and obey all mentors, volunteers and the institute's managing authorities.
- Students must conserve electricity and water. They must switch off lights & fans when they leave the hostel and classrooms.



# Women in Science, Engineering from Rural Parts of India

an IIT Bombay Initiative

May 27<sup>th</sup> – May 31<sup>st</sup> 2024

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## Students' Essentials list:

1. School ID card.
2. Spare contact lenses/glasses (if applicable)
3. All toiletries: Toothbrush, toothpaste, comb, soap, shampoo etc.
4. Prescription medication with doctor's note (if any)
5. School uniforms – two sets.
6. Nightwear,
7. Hostel dresses,
8. Towel and undergarments.
9. Cap
10. Feminine hygiene products.
11. One pair of comfortable walking shoes, One pair of sandals
12. ...
13. ...
14. ...
15. ...
16. ...
17. ...
18. ...
19. ...
20. ...

If you bring Mobile Phones/Charger, you will have to keep it stored in the Hostel Room.



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## Parents' consent letter

I \_\_\_\_\_ ,  
the legal guardian of \_\_\_\_\_ ,  
give my consent for my daughter to travel with a teacher and stay at IIT BOMBAY, Mumbai, from 27<sup>th</sup> May 2024 to 31<sup>st</sup> May 2024 to participate in WiSE program.

Student safety is of utmost importance to the Institute. IIT Bombay is a highly safe and secure campus, consisting of response and vigilance teams that are active 24×7. The campus also houses a well-equipped hospital to address medical emergencies. All hostels on the campus have security guards and CCTV cameras. The girls coming to the IIT Bombay campus will be accompanied by their respective school teachers.

I understand that her participation in this program is vital to her learning process. By signing this form, I agree that my daughter will participate in the WiSE program and travel to various locations on campus. I understand that the IIT Bombay authorities will not be responsible for any untoward incidents during the journey & stay.

I understand that my child will be photographed / video-graphed while participating in various program activities. I have no objection to these photographs & videos being available on the WiSE website.

Parent /Legal Guardian - Mother

Father

Full Name: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

Mobile no: \_\_\_\_\_

\_\_\_\_\_

Aadhar Card No: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

\_\_\_\_\_



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## Student's details

Full name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Aadhar Card No: \_\_\_\_\_

Home address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone no: \_\_\_\_\_

Email ID: \_\_\_\_\_

School's Name: \_\_\_\_\_

## Travel Details – dates (DD/MM/YYYY)

Home to Mumbai: \_\_\_\_\_

Mumbai to Home: \_\_\_\_\_

Travel Mode (Train/Bus): \_\_\_\_\_

## Accompanying teacher's details

Full name: \_\_\_\_\_

School's Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email ID: \_\_\_\_\_



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Medical Consent - Health Conditions Allergies, Asthma, Diabetes, etc. (if any)

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Prescription Medications (if any):

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Child's Medical Care Information Physician/Pediatrician:

Physician/doctor/nurse name (if any): \_\_\_\_\_

Contact number: \_\_\_\_\_

Any other medical information you think the organizers should know:

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Emergency Contact Person's Information

Emergency Contact's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_