

- (Affiliated to Rajasthan Technical University, Kota)
- SP-40, RIICO Industrial Area, RIICO-Kukas, Jaipur-302028
- Ph. 0141-2820731/32/33

- Approved by AICTE, New Delhi
- · Website: www.acerc.org

6.3.1 The Institution has effective Welfare Measures for Teaching and Non-Teaching Staff

Birthday Celebration





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Faculty's Appraisal



RO Drinking Water

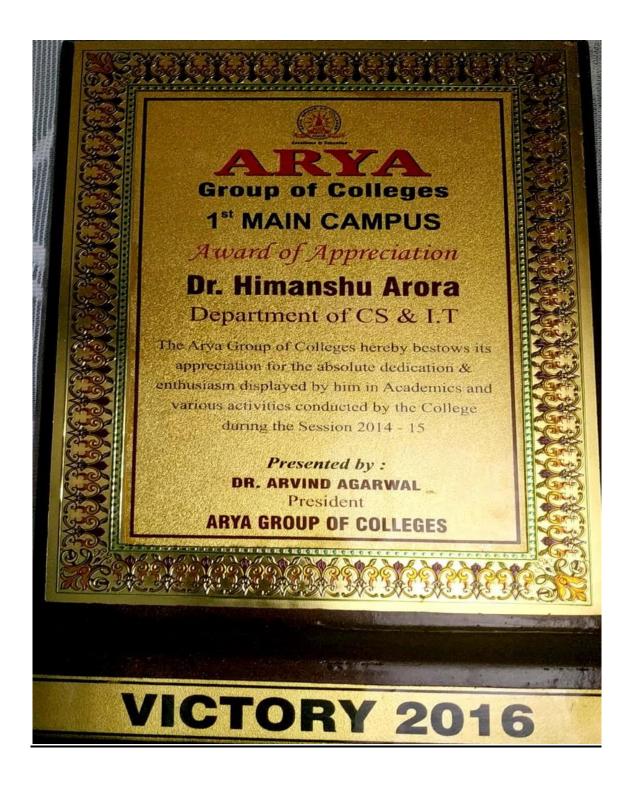




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AWARD OF APPRECIATION

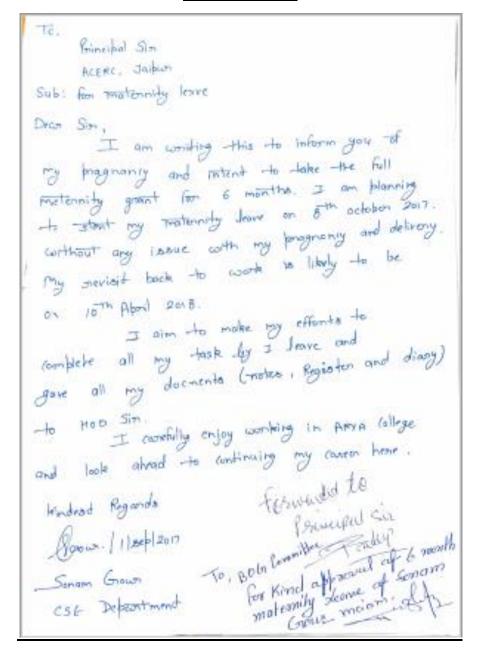




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Maternity Leave

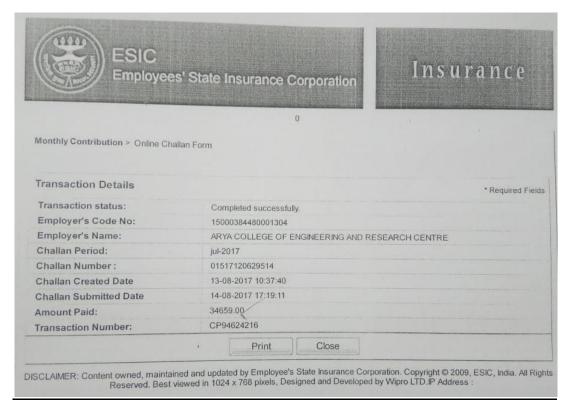


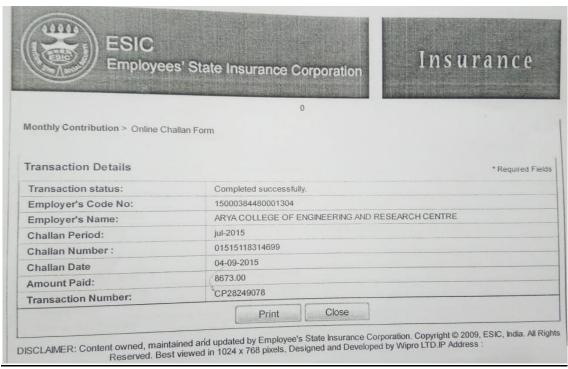


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Employees' State Insurance Corporation (ESIC)







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PROVIDENT FUND (PF)

	co	MBINED CHALLAI EMPLOYEES'	N OF A/C NO. 01, (PROVIDENT FUNI	02, 10, 21 & 22 (Wi D ORGANISATION		RN: 4001803011322	
Estab Addre	olishment Code & Name : RJRAJ002 ess : SP-40, KUKAS INDL AREA, KUKAS	6949000 ARYA COL	LEGE OF ENGINEER	ING &	Dues for the wag	e month of :February 2018	3
	Subscribers : Nages :	3,73,8	EPF 51	EPS 51 3,41,478		EDLI 51 3,41,478	
SL	PARTICULARS	A/C.01 (Rs.)	A/C.02 (Rs.)	A/C.10 (Rs.)	A/C.21 (Rs.)	A/C.22 (Rs.)	TOTAL
1	Administration Charges	0	2.430	0	0	0	
2	Employer's Share Of Contribution	17,552	0	28,448	1.713	0	2,430
3	Employee's Share Of Contribution	44,864	0	0	0	0	47,713 44,864
Grand	Total : Ninety-Five Thousand Seven Rupe	es Only					95.00
		(Only for offline	payment in case p	ermitted by EPEO)			00,00
	ANKS USE ONLY		FOR ES	TABLISHMENT USE		ally filled by Employer)	
	resentation of Cheque/DD			DD No DD drawn bank &	Date:	TOTAL CONTRACTOR OF THE PARTY O	
	Realisation of Cheque/DD			f the Depositer			
	nch Name			Deposit			
	nch Code		Signatur	re of the			
(This is a establish	system generated challan on 15-MAR-20 ment for the specified month and year.	018 17:03, the particular	ars shown in this chal	lan are populated from	n the Electronic Chall	an Cum Return (ECR) up	ploaded by the
Note :- Th	ne following amounts are being remitted d	irectly by Governmen	t of India on account	of PMRPY and PMPF	RPY-		
	1 (Employer share) (Rs.) -			0			
B) A/C no	10 (Pension fund) (Rs.) -			0			
C) Total (A + B) (Rs.) -			0			
D) Total re	emittance by Employer (Rs.) -			95,007			
	mount of uploaded ECR (C + D) (Rs.) -			95,007			

						TRI	RN: 4001512004334 Employer E-Sewa
		OF ENGINEERING	& RESEARCH CE	ENTRE			
						Dues for the way	ge month of:11/2015
CRIBERS:	A/C.01 22	A/C.10	22	A/C.21 22			
es:	A/C.01 277320	A/C.10	247120	A/C.21 247120			
ULARS		A/C.01	A/C.02	A/C.10	A/C.21	A/C.22	TOTAL
YER'S SHARE OF CONT.		12690		20587	1237		34514
		33277					33277
CHARGES			2357			200	2557
TION CHARGES							
DAMAGES							
AYMENT (INTEREST U/S 7Q)							
(IN WORDS) : Rupees Seventy ly	Thousand Three Hundred	and					7034
USE ONLY			Cheque	/DD No	Date: -		
station of Cheque/DD		-	Uneque Name o	of the Depositer	-11		
			Date of	Deposit N	obile No	-	
ine			Signatu	re of the Depositor			
			0	KINDLY SUBMIT CHEC	UE/DEMAND DRA	FT & CHALLAN AT SBI	COUNTER ONLY)
	P-40, KUKAS INDL AREAKUKAS CRIBERS: SS: ULARS VER'S SHARE OF CONT. VEE'S SHARE OF CONT. CHARGES DAMAGES AYMENT (INTEREST U/S 70) (IN WORDS): Rupees Seventy by USE ONLY Ved Rs. Lation of Cheque/DD Lation of Cheque/DD	P-40, KUKAS INDL AREAKUKAS JAIPUR 203R J CRIBERS: A/C.01 22 IS: A/C.01 277320 ULARS VER'S SHARE OF CONT. VEE'S SHARE OF CONT. CHARGES DAMAGES DAMAGES DAMAGES LYMENT (INTEREST U/S 70) (IN WORDS): Rupees Seventy Thousand Three Hundred by USE ONLY	P-40, KUKAS INDL AREAKUKASJAIPUR203RJ CRIBERS: A/C.01 22 A/C.10 IS: A/C.01 277320 A/C.10 ULARS A/C.01 VER'S SHARE OF CONT. 12690 YER'S SHARE OF CONT. 33277 HARGES DAMAGES DAMAGES LYMENT (INTEREST U/S 7Q) (IN WORDS): Rupees Seventy Thousand Three Hundred and by USE ONLY VER'S SHORE OF CONT. 12690 USE ONLY VER'S SHORE OF CONT. 12690 JUNE ON THE PROPERTY OF THE PROPE	P-40, KUKAS INDL AREAKUKASJAIPUR203RJ CRIBERS: A/C.01 22 A/C.10 22 A/C.10 247120 ULARS A/C.01 A/C.02 YER'S SHARE OF CONT. 12690 33277 HARGES TION CHARGES JAMAGES JAM	AC.01 22 AC.10 22 AC.10 22 AC.21 22 AC.01 277320 AC.10 247120 AC.21 247120 AC.01 277320 AC.01 247120 AC.21 247120 AC.01 AC.02 AC.10 AC.02 AC.10 AC.02 AC.10 AC.03 AC.01 AC.02 AC.10 AC.03 AC.01 AC.02 AC.10 AC.03 AC.01 AC.02 AC.10 AC.04 AC.05 AC.05 AC.05 AC.06 AC.01 AC.02 AC.10 AC.02 AC.10 AC.03 AC.04 AC.05 AC.06 AC.01 AC.02 AC.10 AC.02 AC.10 AC.02 AC.10 AC.03 AC.10 AC.03 AC.04 AC.05 AC.10 AC.05 AC.10 AC.05 AC.10 AC.06 AC.01 AC.02 AC.10 AC.02 AC	P-40, KUKAS INDL AREAKUKASJAIPUR203RJ CRIBERS: A/C.01 22 A/C.10 22 A/C.21 22 A/C.01 277320 A/C.10 247120 A/C.21 247120 ULARS A/C.01 A/C.02 A/C.10 A/C.21 VER'S SHARE OF CONT. 12690 20587 1237 VEE'S SHARE OF CONT. 33277 THARGES TION CHARGES JAMAGES JAMAGES	P-40, KUKAS INDL AREAKUKASJAIPUR203RJ CRIBERS: A/C.01 22 A/C.10 22 A/C.21 22 IS: A/C.01 277320 A/C.10 247120 A/C.21 247120 ULARS A/C.01 A/C.02 A/C.10 A/C.21 A/C.22 VER'S SHARE OF CONT. 12690 20587 1237 VEE'S SHARE OF CONT. 33277 CHARGES 2357 200 UNIT CONTROL OF CONT. 3257 CONTROL OF CONT. 3257 CONTROL OF CONT. 3257 CONTROL OF CONT. 3257 CONTROL OF CO



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Insurance

GROUP PERSONAL ACCIDENT INSURANCE

Royal Sundaram General Insurance Co. Limited (Formerly known as Royal Sundaram Alliance Insurance Company Limited) 607-611, 6th Floor, V-Jai City Point, Subhash Marg, C-Scheme Royal Sundaram laipur - 302 001, Tel. No.: 0141-4003421 | Toll No.: 1860 425 0000 General Insurance E.mail: customer.services@royalsundaram.in Website: www.royalsundaram.in Registered Office: 21, Patullos Road, Chennai - 600 002. IRDAI Registration Number - 102 | CIN-U67200TN2000PLC045611 GROUP PERSONAL ACCIDENT INSURANCE Policy Schedule OA503487 IntermediaryCode Vishal Sharma IntermediaryName 9414062769 Contact Period of Insurance: AG00057346000101 Policy Number Name and Address of the Arya College of Engg. & Research Centre From 14/11/2018 Insured To 13/11/2019 RIICO Industrial Area Kukas Jaipur Rajasthan JAIPUR 303101 INSURED PERSON DETAILS No of persons covered: 1500 As per Specification attached SUMINSURED DETAILS Total Sum Insured PREMIUM DETAILS Table of Benefits Benefit 1 to 4.(Unnamed Basis) As per Group Personal Accident Policy Terms and Conditions attached This Schedule is subject to the Group Personal Accident Policy Terms and Conditions and the following endorsements attached herewith: PA3(a),PA13,PA15,PA18 THIRD PARTY ADMINISTRATOR: N.A. Please quote the Policy Number in all your correspondence.
IN WITNESS WHEREOF, this Policy of Insurance has been signed on 26/11/2018 Receipt No. 1800045367 GSTIN No.: 08AABCR7106GIZJ PAN Number: AABCR7106G Consolidated Stamp Duty paid to Government of Tamil Nadu Policy Servicing Office: 607-611, 6th Floor V-Jai City Point, Subhash Morg, C-Scheme Japur - 302 00 For Royal Sundaram General In UIN: IRDA/NL-HLT/RSAI/P-P/V/U185/13-14 IRDA Regn.No. 102



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GROUP PERSONAL ACCIDENT POLICY

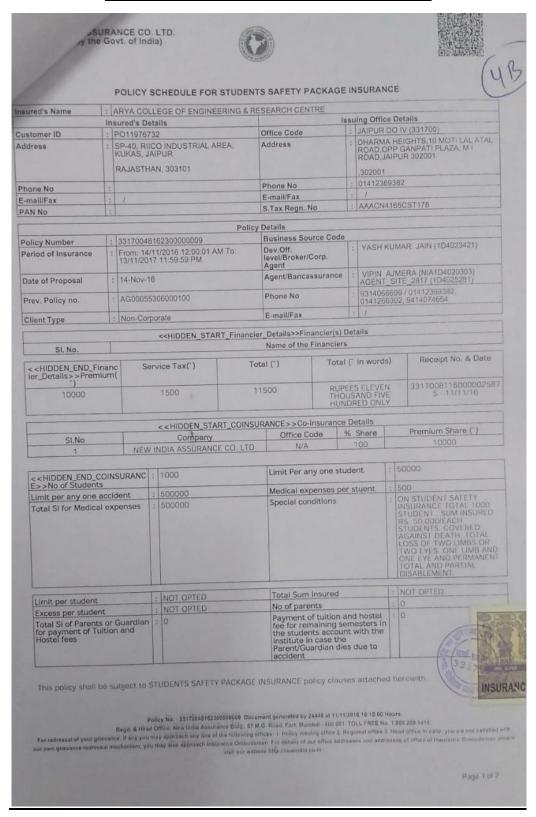
Royal Sundaran	1 (Formerly know Rider House Gurgaon - 1 Fax : 91-124 E.mail: cust Website: wy	en as Royal Sundaram Alliance Insurance Co. Limited en as Royal Sundaram Alliance Insurance Company Limited) e, Ground & First Floor, Plot No. 136, Sector-44, 22 002. Haryana Tel: 91-124-238 3828/33/34 4-238 3829 Toll No.: 1860 425 0000 tomer.services@royalsundaram.in oww.royalsundaram.in Office: 21, Patullos Road, Chennai – 600 002. ttration Number – 102 CIN-U67200TN2000PLC045611
	GROUP PERSONAL ACCIDE SCHEDULE	NT POLICY
Intermediary Code Intermediary Name	BR172000 AUTHENTIC INS. BROKEI	RS INDIA LTD
Policy Number Name and Address of the	AG00057346000100 Arya College of Engg. & Research Centre	Period of Insurance: From 14/11/2017 To 13/11/2018
Insured	SP-40,RIICO Industrial Ar Kukas Jaipur Rajasthan Ja	ea ipur 303101
-	INSURED PERSON DE	TAILS
	No of persons covered (Unnamed Basis)	: 1500
Total Sum Insured	SUM INSURED DET	75,750,000.00
Total Sum Histieu		10
	PREMIUM DETAI	12,187.00
Premium TPA Fees	Rs.	0.00
SGST	Rs.	1,097.00
CGST	Rs.	1,097.00 14,381.00
Total	Rs.	14,004.00
	Table of Benefit	S
ASSESSMENT OF THE PARTY OF THE	Benefit 1 to 4	
As per G	roup Personal Accident Policy Terr	ms and Conditions attached
This Schedule is subject	to the Group Personal Accident	Policy Terms and Conditions and the
following endorsements	PA3(a),PA13,PA15,I	PA18
THIRD PARTY ADMIN		
IN WITNESS WHEREO Receipt No. 1700047550 GSTIN No. : 08AABCR7 IRDA Regn.No. 102	Number in all your corresponder F, this Policy of Insurance has be 106G1ZJ PAN Number : AABC	R 7106G
Consolidated Stamp Du Issued at: Chennai	ty paid to Government of Tamil	
Policy Servicing Office:	For Roya	I Sundaram General Insurance Co. Limited Authorised Signatory



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STUDENT SAFETY PACKAGE INSURANCE





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· Website: www.acerc.org

THE NEW INDIA ASSURANCE CO. LTD. Wholly owned by the Govt. of India)





POLICY SCHEDULE FOR LIFT INSURANCE PRODUCTS

Daniel III	- 1	ALL INDIA ARYA SAMAJIS SOCIETY	FOR HIGHER & TEC. EDU.					
Customer ID		PO11976679	Issuing Office Details					
Address Phone No	13	SP-40, RIICO INDUSTRIAL AREA.	Office Code	1	JAIPUR DO IV (331700)			
		RAJASTHAN, 303101	Address	1	DHARMA HEIGHTS, 10 MOTI LAIL ATAI ROAD, OPP GANPATI PLAZA, MI ROAD, JAIPUR 302001			
E-mail/Fax	-		Phone No	-	,302001 01412369382			
PAN No	: 1		E-mall/Fax	1	/			
	- 10		S.Tax Regn. No	8				

Name and Address of the Parket	-	Pol	icy Details					
Policy Number	1	33170036161400000002	170038161400000000					
Period of Insurance		From: 14/11/2016 12:00:01 AM To:	Business Source Code					
		13/11/2017 11:59:59 PM	Dev.Off. level/Broker/Corp. Agent	44	YASH KUMAR JAIN (104023421)			
Date of Proposal	1	14-Nov-16	Agent/Bancassurance		VIPIN AJMERA (NIA1D4020303) AGENT_SITE_2817 (1D4025281)			
Prev. Policy no.	**		Phone No	-	9314066699 / 01412369382, 0141266302, 9414074654			
Client Type	:	Non-Corporate	E-mail/Fax	2	1			

Premlum()	Service Tax(`)	Total(')	Total:(` In words)	Receipt No. & Date
1750	263	2013	RUPEES TWO THOUSAND THIRTEEN ONLY	3317008116000002587

Details of Risks Covered Under Policy:

Type of Risk		: LIABILITY(Others)											
Retroactive Dates	Date	Jurisdiction	Territory	AOA	AOY/Total Sum Insured	Turnover	Deductible India	Deductible Rest of the world	Deductible USA/Canada				
Policy Retroactive Date	14/11/201 6	India	NA	500000	500000		.0	-0	0				

Extensions under the Policy Risk

Name of the Extension	Sub limit of the Extension	Deductibles of the Extension
-----------------------	----------------------------	------------------------------

Special Conditions	AS PER LIFT TP INSURANCE LIFT T.P. INSURANCE NA	
Special Exclusions	NA	
Special Excess/Deductible	NA	

This Policy shall be subject to LIFT INSURANCE policy clauses attached herewith

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s)

on this 11th day of November, 2016.

Date of Issue: 11/11/2016



For and on behalf of The New India Assurance Company Limited

Duly Constituted Attorney(s)

Stamp Duty under the Policy Is 1/-

Pollov No. : 33170036161400000002 Document generated by 24448 at 11/11/2016 16:12:15 Hours



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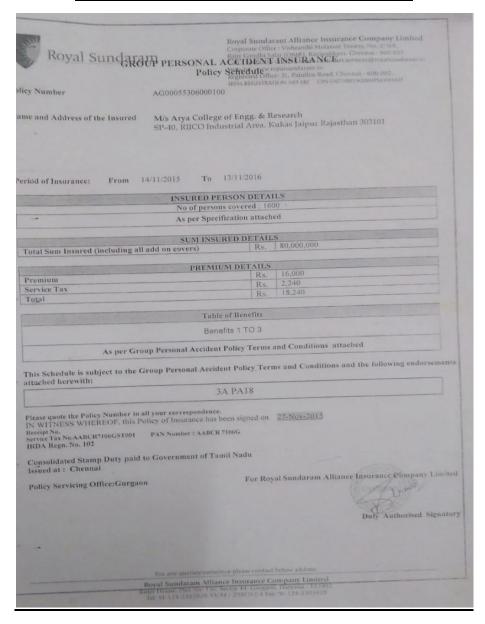
POLICY SCHEDULE FOR STUDENTS SAFETY PACKAGE INSURANCE Insured's Name : ARYA COLLEGE OF ENGINEERING & RESEARCH CENTRE											
nsured's Nam					NEERING &	RESEARCH CENTRE					
Customer ID		Insured : PO11				0/5 0 /		ssuing C			
Address		SP-40 KUKA	P-40, RIICO INDUSTRIAL AREA, UKAS, JAIPUR AJASTHAN, 303101					: JAIPUR DO IV (331700) : DHARMA HEIGHTS, 10 MOTI LAL ATAL ROAD, OPP GANPATI PLAZA, M I ROAD JAIPUR 302001			
Phone No		:				Phone No : 0141			2200	202	
E-mail/Fax		: /				Phone No : 014123			2309	302	
PAN No		:				S.Tax Regn. No : AAACN4165CS			65CST178		
Policy Details											
Policy Number Period of Insu				8142300000010		Business Source Code				THE THE	
			From: 14/11/2014 12:00:01 AM To: 13/11/2015 11:59:59 PM		Dev.Off./Broker/Corp. : Y Agent		: YAS	YASH KUMAR JAIN (1D4023421)			
Date of Propo	sal	: 14-No	V-1	4		Agent/Bancassurance : VIPI			N AJ	MERA (1D4020303) ITE_2817 (1D4025281)	
Prev. Policy n	0.	: 33010	24	8132300000008		Phone No : 9314			0666	99 / 01412369382	
Client Type		: Non-C	Non-Corporate			E-mail/Fax : /		1266302, 9414074654			
		<< HIDDEN_START_Financier_Details>> Financier(s)									
SI, No).			THE DELT OF A	iki_rmanci	Name of the		etails			
< <hidden_e ier_Details></hidden_e 	END_Finance >Premium	c (Service Tax(`)		Total (*)		Total	Total (* in words) Receip		Receipt No. & Date	
16000			1978			THOUS		S SEVENTEEN USAND NINE 5 - 12/11/14 5 - 12/11/14 5 - 12/11/14			
				< <hidden_sta< td=""><td>RT_COINSU</td><td colspan="3">RANCE>>Co-Insurance Details</td><td colspan="3"></td></hidden_sta<>	RT_COINSU	RANCE>>Co-Insurance Details					
SI.N	lo	Company				Office Code % Share		Premium Share (*)			
1		NEI	N.I	NDIA ASSURANC	E CO. LTD.	N/A		100		16000	
< <hidden_e< td=""><td>ND_COINS</td><td>URANC</td><td colspan="2">NC : 1600</td><td colspan="2">Limit Per any one student</td><td colspan="3">: 50000</td></hidden_e<>	ND_COINS	URANC	NC : 1600		Limit Per any one student		: 50000				
E>>No of Stu Limit per any	udents		: 500000		Medical expenses per stuent		E Parameter Comments				
Total SI for M				800000		Special cond		: ON STUDENT SAFE INSURANCE TOTAL STUDENT SUM IN RS 50.000/-EACH STUDENTS. COVER AGAINST DEATH, T LOSS OF TWO LIMI TWO FYES ONE II		ON STUDENT SAFETY VSURANCE TOTAL 1500 TUDENT . SUM INSURED S. 50.000-EACH TUDENTS. COVERED GAINST DEATH, TOTAL OSS OF TWO LIMBS OR WO EYES. ONE LIMB AND INE EYE AND PERMANENT OTAL AND PARTIAL JISABLEMENT.	
Limit per stud				NOT OPTED		Total Sum Ins	ured		: N	OT OPTED	
Excess per st Total SI of Par	rents or Gu	uardian		NOT OPTED	1	No of parents Payment of to		hastal	: 0		
for payment of Hostel fees	of Tuition a	ind				fee for remail the students institute in ca Parent/Guard accident	ning seme account w ise the	sters in ith the	. 0		



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GROUP PERSONAL ACCIDENT INSURANCE





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Website: www.acerc.org

HDFC ERGO General Insurance Company Limited



GROUP PERSONAL ACCIDENT INSURANCE POLICY

SECTION 1 - SCHEDULE

Policy Number: 2999203125450100000

Name & Address of the Policyholder
 Arya College of Engineering And Research Center

S - 40, RIICO Industrial Area, Kukas,

Jaipur, Rajasthan - 303101.

GSTIN State Rajasthan

State Code 08

GSTIN NA

2. Agent/Broker Name: Vikas Jain

3. Policy Period From 00:01 hours: November 14, 2019

To (Midnight) : November 13, 2020

4. a. Maximum Any One Life Limit: Rs. 20,000,000.00

b. Maximum Accumulation Limit: Rs. 95,000,000.00

5. Operative Time: 24 Hours

6. Territory of Insurance: Worldwide

7. Details of the Insured Persons:

Category of Insured Person	No.	Nature of Duties
Director	1	Managerial & Administrative Functions
Students	1,500	Full time students of the Institute
TOTAL	1,501	

8. Premium Payable:		
		Annual
Net Premium	Rs.	17,000.00
Add: GST 18%: CGST 9% (Rs. 1,530.00) + SGST 9% (Rs. 1,530.00)	Rs.	3,060.00
Total Amount Payable	Rs.	20,060.00

Invoice Number: 203125450100000

SAC Code: 9971

Note: "Goods and Services Tax for this invoice is not payable under reverse charge basis"

Policy No. 2999203125450100000

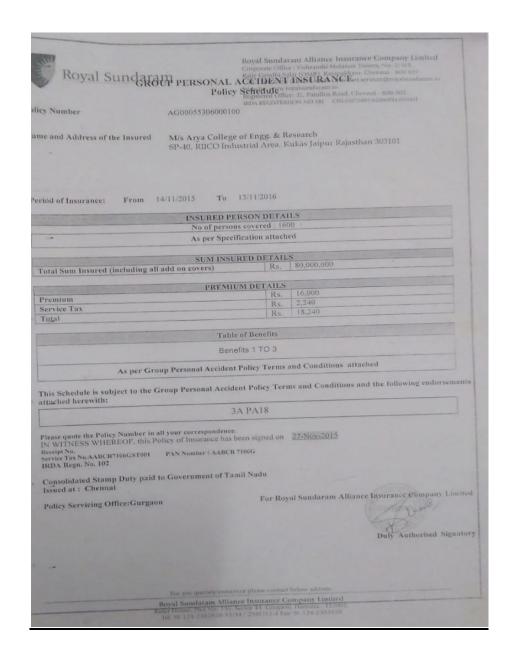
Page 2 of 23

HDFC ERGO General Insurance Company Limited. (Formerly HDFC General Insurance Limited from Sept 14, 2016 and L&T General Insurance Company Limited upto Sept 13, 2016) CIN: U66030MH2007PLC177117. Registered & Corporate Office: 1st Floor, HDFC House, 165—166 Backbay Reclamation,H. T. Parekh Marg, Churchgate, Mumbai – 400 020.Customer Service Address: D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai – 400 078.Toll Free Number: 1800 2700 700 Te. 491 22 6638 3800 | Fax: 91 22 6638 3699 | care@hdfcergo.com | www.hdfcergo.com, UIN HDFPAGP03006V010203 IRDAI Reg



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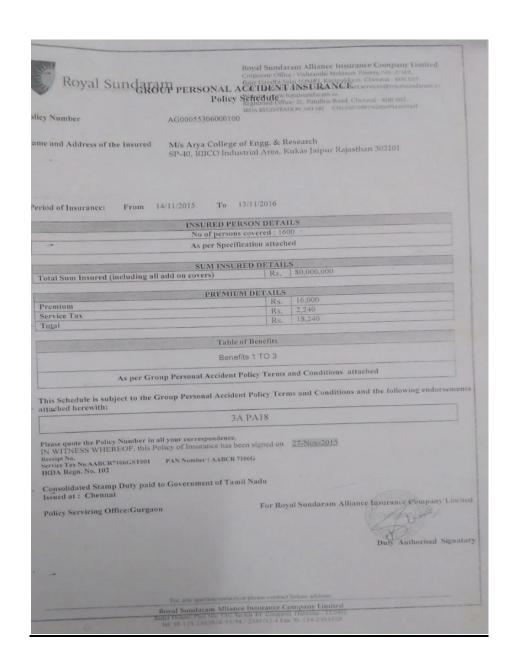
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Website: www.acerc.org

HDFC ERGO General Insurance Company Limited



GROUP PERSONAL ACCIDENT INSURANCE POLICY

SECTION 1 - SCHEDULE

Policy Number: 2999203125450100000

Name & Address of the Policyholder
 Arya College of Engineering And Research Center

S - 40, RIICO Industrial Area, Kukas,

Jaipur, Rajasthan - 303101.

GSTIN State Rajasthan

State Code 08

GSTIN NA

2. Agent/Broker Name: Vikas Jain

3. Policy Period From 00:01 hours: November 14, 2019

To (Midnight) : November 13, 2020

4. a. Maximum Any One Life Limit: Rs. 20,000,000.00

b. Maximum Accumulation Limit: Rs. 95,000,000.00

5. Operative Time: 24 Hours

6. Territory of Insurance: Worldwide

7. Details of the Insured Persons:

Category of Insured Person	No.	Nature of Duties		
Director	1	Managerial & Administrative Functions		
Students	1,500	Full time students of the Institute		
TOTAL	1,501			

8. Premium Payable:		
		Annual
Net Premium	Rs.	17,000.00
Add: GST 18%: CGST 9% (Rs. 1,530.00) + SGST 9% (Rs. 1,530.00)	Rs.	3,060.00
Total Amount Payable	Rs.	20,060.00

Invoice Number: 203125450100000

SAC Code: 9971

Note: "Goods and Services Tax for this invoice is not payable under reverse charge basis"

Policy No. 2999203125450100000

Page 2 of 23

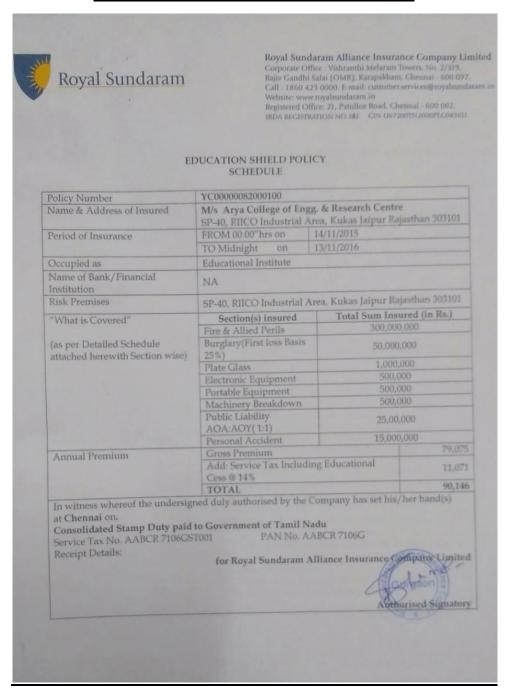
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EDUCATION SHIELD POLICY SCHEDULE

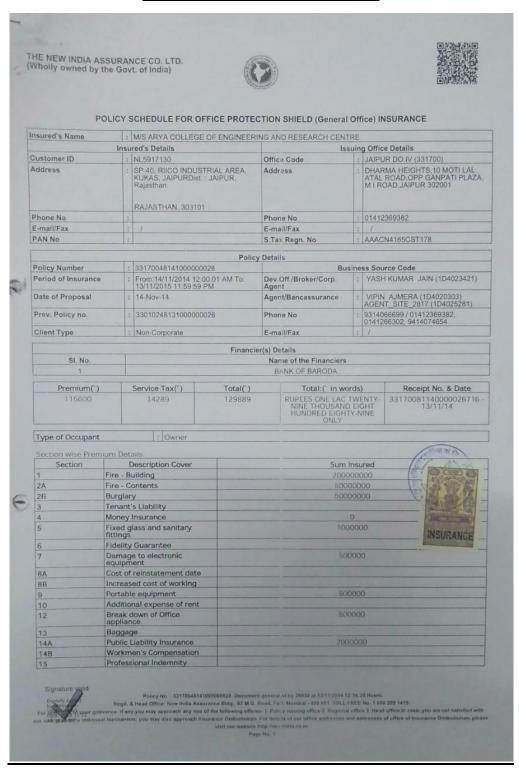




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APPLICATION FOR REMUNERATION OF FDP/SEMINAR/WORKSHOP/ **CONFERENCE**

Faculty Name:- And A FDP/SEMINAR/WORKSHOP Conference On	kumaun P/CONFEREN	Sharm CE Name	a International
Conference on	VCAN-		b
Date05 05 . 201.8 to	06/05/2018	ڳ Total	02 days
Faculty Signature			Principal

HoD Signature