#### GOVERNMENT OF INDIA MINISTRY OF EXTERNAL AFFAIRS NEW DELHI

## GUIDELINES FOR KNOW INDIA PROGRAMME (KIP)

#### **1. INTRODUCTION**

KIP is an engagement programme for Diaspora youth (between the age of 21-35 years) of Indian origin to introduce them to India and promote awareness about different facets of Indian life, our cultural heritage, art and various aspects of contemporary India. This programme is open to youth of Indian origin (**excluding Non-Resident Indians**). The programme has been in existence since 2003-04.

## 2. MAIN ELEMENTS OF KIP

(i) Presentations on India, and its polity, economy, history, culture, etc.

(ii) Visit to institutes of democracy and governance like Parliament of India, Election Commission of India, Rashtrapati Bhawan and call on High Dignitaries.

(iii) Showcasing achievements in diverse sectors, including Science & Technology, Information Technology, Pharmaceuticals, Infrastructure, Startup ecosystem, Digital infrastructure, India Stack, JAM Trinity, Education, Defence, Agriculture and Tourism.

(iv) Visit to places of historical, and cultural importance.

(v) Familiarization with cultural and civilizational heritage of India, including Yoga, Ayurveda, Classical forms of Music and Dance.

(vi) Exposure to Govt. of India schemes like Skill India, Digital India, Aatmanirbhar Bharat, StartUp India.

(vii) Visit to industrial sites, public and private firms to showcase India's strength in Manufacturing &Services sector.

(viii) Immersion program along with interaction with faculty and students at a prestigious University/College/Institute.

(ix) Visit to leading Scientific and Research Institutions.

(x) Exposure to Indian Media and Broadcasting industry.

(xi) Visit to one or two State(s) in India to expose the participants to the cultural diversity of India.

## 3. ARRANGEMENTS

(i) The Ministry of External Affairs, Government of India will take care of participants only for the duration of the programme. If participants wish to arrive in India early or stay extra, they will have to make their own arrangements.

(ii) The participants are provided local hospitality e.g. boarding/lodging in budget hotels and internal transportation in India (including airport transfers).

(iii) Missions will arrange for return air tickets before participants leave for India, after getting 10% of total air fare from them.

(iv) Gratis visa shall be granted to selected participants by the Indian Missions/Posts abroad.

## 4. ELIGIBILITY CRITERIA

(i) Age: The programme is open to youth of Indian origin **(excluding non-resident Indians)** in the age group of 21-35 years, as on the first day of the month in which the programme is expected to begin.

(ii) It is open to PIO youth from all over the world. Applicant must provide his/her OCI card number or PIO card number or that of his/her parents or grandparents. In the absence of any documentary proof of Indian Origin, the applicant must submit a written undertaking about his Indian Origin which must be attested by DCM/DCG or HOM/HOP of the Mission/Post.

(iii) Non-Resident Indians (NRIs) are not eligible to apply.

(iv) Previous participation: The applicant should not have participated in any previous edition of Know India Programme or any other programme organized and paid for by the Ministry of External Affairs and any other Ministry/Department in Government of India or a State Government in India.

(v) Educational Qualification: Minimum qualification required for participating in KIP is graduation from a recognized University/Institute. Applicants pursuing graduation are not eligible to apply.

(vi) Language: The applicants should be able to speak in English, should have studied English as a subject at the High School level or have English as the medium of instruction for undergraduate course.

(vii) The applicants who have not visited India before will be given preference.

## 5. DURATION.

The duration of the programme is about three weeks (including international travel).

## 6. INTERNATIONAL MEDICAL AND TRAVEL INSURANCE.

There have been some previous instances in KIPs where participants have faced health issues during their visit to India. In the absence of a valid travel and medical insurance policy, it is difficult to settle the expenditure incurred on the medical care for the participant while in India. Therefore, all KIP participants will need to submit a copy of a valid international travel insurance and medical insurance policy for the duration of their visit to India. The participants will also need to submit a medical fitness report or certificate confirming their ability to undertake long-distance and extended-duration travel.

## 7. SUBMISSION OF PROGRAMME REPORT BY THE SELECTED PARTICIPANTS

For the successful completion of the KIP programme, participants will be required to submit a 750-1000 words Programme Report outlining their experiences and insights from the programme. The report will be detailed account of their learnings from the Programme and how the visit has helped improve their understanding about India. The participants will receive Certificates only after the acceptance of their Programme Reports.

8. Duly filled up Applications can be submitted at Consulate General of India, Guangzhou as per following deadlines:

Editions of	Last Date of Submission of Application forms at Consulate	KIP Event							
KIP		from	То						
80th	05.12.2024 (1700 hrs)	29.12.2024	17.01.2025						
81st	09.12.2024 (1700 hrs)	02.01.2025	21.01.2025						

9. If the applicant is applying for both editions of KIP, separate applications may be filled up and submitted in separate envelope.

10. Applications can also be sent by mail/courier at the following address. The application along with all the documents may be sent well in advance so that it reaches us before the deadlines mentioned at Para 8 above.

Consulate General of India, Guangzhou 1-4, 14/F, HNA Tower, No. 8 Lin He Zhong Road Tianhe District, Guangzhou 510610, China

印度驻广州总领事馆广州市天河区林和中路 8 号海航大厦 14 楼 01-04 单元 Tel 电话: +86-20-85501501

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#### GOVERNMENT OF INDIA MINISTRY OF EXTERNAL AFFAIRS NEW DELHI

## APPLICATION FORM FOR KNOW INDIA PROGRAMME (KIP)

KIP Edition No.

Attach Recent Passport size photo

Note: Candidates are requested to attach all required documents such as Passport Copy, Education Qualification Certificate, PIO/OCI/Annexure-C, Passport Size Colored Photograph & other relevant documents with this Application before forwarding the same to the Indian Missions/Posts concerned.

## A. <u>PERSONAL DETAILS</u>

(i) Complete Name (as in Passport in **BLOCK** letters)

	Last Name	First Name	Middle Name							
(ii)	Gender :	Male/Female								
(iii)	Date of Birth:	D D M M Y Y Y Y								
(iv)	Place of Birth									
(v)	Nationality									
(vi)	Place of Residence									
(vii)	Passport Number									
	Place of issue: (City) Date of issue:	(Country)								
(viii)	Date of Expiry: Telephone Number: (with country and city co Work	ode)								
	Residence									
	Mobile/Cell									

Fax Number												
Email:												
(ix) Complete mailing address	with ZIP Co	ode:										
(x) Permanent home address with ZIP Code <u>:</u>												
(xi) Your or your parents plac	e of origin i	n India :_							-			
B. <u>Proof of Indian Origin</u>												
Hold PIO/OCI Card -	Yes	/No										
PIO Card No:Dat issue	te of Issue_			Place c	of							
OCI Card No:Dat issue	te of issue_			Place c	of							
Please write details of PIO or OC Mother/Father/Grandfather	•											
Name of PIO/OCI Card holder												
C. <u>Details of Family/Relative</u>	e(s) in India	<u>a</u>										
(i) Name, address (if available migrated from India:	e) and your	relations	hip with	ı your n	eares	st relat	ive	wh	0			
(a) Complete Name												
(b) Last Known address of your r	relative											
(c) Your relationship with him/her												
(d) Mobile number of your relative code	ve with city											
D. EDUCATION												
	Gra	duate		Un	dergra	aduate						

		Graduate	Undergraduate
(i)	Name/Location		
	College/University from where		
	you graduated or are studying.		
(ii)	Subjects of study		
(iii)	Language of instruction in		
	college/university		
(iv)	Describe your English language		
	skills		

## E. <u>Occupation/Employment:</u>

S. No.	Organization/Company	Position	Period							
	Organization/Company (Complete Name and Location address)		From	То						

# F. Any achievements professional/educational or other that you want to share with us:

#### G. Your

interests/hobbies\_\_\_\_\_

#### H. International Medical and Travel Insurance Policy

Policy No. -

\_\_\_\_\_

Name of the insurance company -

Valid from (Date) -

Valid until –

## Annexure-A

## I. OTHER DETAILS:

1.	Have you participated in a previous Know India Programme? If yes, provide details.	Yes / No
2.	Have you visited India earlier? If yes, No please month and year of the visits, places visited and purpose:	Yes /
3.	Has any sibling/ relative of yours attended KIP before	Yes / No
4.	Please describe, in not more than 250 words, why do you want to take part in the Know India Programme?	

#### **DECLARATION:**

I, HEREBY, DECLARE THAT ALL THE INFORMATION GIVEN IN THIS Application Form are true and correct to the best of my information and belief.

I also declare that I will abide by the regulations of the Know India Programme, would offer my full cooperation in its smooth conduct, and would not leave it mid-way.

I understand that if I am found guilty of any misconduct or indiscipline during the course of the Programme, I could be refused any further participation in the said programme or participation in any future KIP and that I would not be eligible for reimbursement of the 90% of the return international airfare from my country of residence to India. The said reimbursement of 90% of the international airfare would also not be made to me if I leave the Programme mid-way.

(Signature of the applicant)

Date:

Place:

## <u>Annexure-C</u>

## DECLARATION

(For applicants who do not possess any documentary evidence of Indian Origin)

Ι			_  (complete th), daughter/son of			
(Complete reasons:	name) do hereby		am of Indian origi			
					<u></u>	<u> </u>
		Signature o	of the Applicant:			
		Complete	Name:			
Date:						
Place:						
		С	ountersigned and st	amped by		
		Head	d of Indian Mission o	or DCM/DHC	/DCG	
		Complete	Name:		<u> </u>	
		Office Sea	al:			
Date:		_				

Place:\_\_\_\_\_

Annexure-D

## COMMENTS OF THE CONCERNED INDIAN MISSION/POST

Name of Indian Mission/Post:												

Recommendations of the Head of Mission/Post:

Signature of HOM/HOP \_\_\_\_\_

Name of the HOM/HOP\_\_\_\_\_

Office Seal