Annex 5:

Official Case Application Template

1. Submission of a complaint to ICB

- 1.1. Before any party can submit a complaint to ICB, it has to try to settle the issue on a Local and ECB Levels.
- 1.2. If the parties involved can not reach a mutual agreement within 3 days on a local level and 7 days period on ECB Level, it is advised that the situation should be taken to ICB.
- 1.3. We advise it should start with a Consultancy, preferably mutual (SE & HE), so all sides can clear doubts before enrolling in an Official Case. This process is not mandatory.

2. The following steps must be followed to submit a complaint to ICB:

- 2.1. Submit through ICB email or zendesk form, the Opening of the OCA. The email content must have the following topics, but to not be limited to:
 - 2.1.1. LC to LC and ECB to ECB correspondences email in one (1) PDF where ICB can find that mutually acceptable solution could not be found, or no response was given from one side to the other, respecting the case solving flow.
 - 2.1.2. All proofs of acclaimed AEPP violations which can include but not be limited to: Receipts, Flight tickets, Examples of communication, Evidence of agreements (through contracts or media), acceptance notes, pictures. Documents must be in english, if not possible, please submit the translation.
 - 2.1.3. Application package proofs should all be in one (1) ZIP folder, named with the case title_entity name, attached to the email separated from the OCA PDF.
 - 2.1.4. The OCA fill that must be sent in both PDF, and editable version.

- 2.1.5. Each claim has to be into a separate folder, labeled with the violation it will be proving as fact.
- 2.1.6. Documents inside the folders must be organized and named according to the order and/or violation they are proving.
- 2.2. ICB has the right to request at any moment, that documents are notary translated.
- 2.3. Along with the Package in ZIP, ECB or MC Responsible for ECB of the Claiming entity has to sign the last paragraph of the Official Case Application model found belo.

3. ICB will inform the relevant Responding entity of the complaint by submitting Official Case Application Package to it, to respond.

- 3.1. ECB of Responding entities has five (5) days to submit their answer to the case by filling in the Official Case Application which was sent to them.
- 3.2. The respondent may also file a claim against the original claimant. Such counter-claims must include the same information originally submitted by the claimant.
- 3.3. The same rules of proof submission mentioned to the claimed entity, apply to respondent: 1 ZIP file, with the same rules inside.
- 3.4. Once the above information is gathered, ICB will email the entities with any requests for required additional information. All information must be submitted within five (5) days from the date of the email. In case the entity cannot meet this deadline then the entity can ask for additional time before the deadline by directly submitting such a request to ICB e-mail address icb@ai.aiesec.org. In case of an emergency or when basic living conditions of an intern do not fulfill the standards (lack accommodation, lack of salary etc.) the case can be solved only by the ICB Chair and ECB Chairs within 48h.

Official Case Application (OCA)

Country PLACING claims must fill out portions of the document in **RED ONLY**.

Country RESPONDING to claim must fill out portions of the document in **BLUE ONLY**.

Case Information

| Date of Claim | |
|-----------------------------|--|
| Entity placing Claim | |
| EP/OP link in EXPA | |
| Claiming entity LC | |
| Entity Contact Name | |
| Entity Contact Email | |
| Date of Response | |
| Entity responding to Claim | |
| OP/EP Identification number | |
| Responding entity LC | |
| Entity Contact Name | |
| Entity Contact Email | |

Complaint

| Summary of the complaint | | | |
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| Response to the summary of the complaint | | | |
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AIESEC Exchange Portfolio Policies (AEPP) Violations

- Please list the policies that you consider violated along with proofs that will be found on the ZIP folder (This could include letters/ emails/ scanned documents of the various parties involved), and the experience with the Intern/OP organization with dates.
- 2. Please be concise and factual, and leave out any emotional information.
- 3. Please note: If Claiming Entity feels that there are more than 3 policies violated, please copy and paste further Claim Boxes as needed.

| Claim 1 Violates AEPP in: (please include the policy number with the original text of AEPP) | |
|---|--|
| Date of Violation | |
| Proof for claim 1 (please create a folder with all the files corresponding proofs for claim 1 and name it "Proof for claim 1" and place it in the package. Detail to us what is inside the package) | |
| Additional Information (if needed) | |
| Response: Claim 1 AEPP Violated. Do you accept/deny this claim? Why? | |

| Date of Violation | |
|--|--|
| Proof (please create a folder with all the files corresponding proofs for this claim and name it "Proof for claim 1" and place it in the package. Detail to us what is inside the package) | |
| Additional Information (if needed) | |

(*) add more tables by copying and pasting the previous one if you have more than 1 (one) claim and nominate it as "claim 2" or the corresponding number.

Expected Compensations

- 1. Please fill in this table If you expect any financial compensation to be arbitrated.
- Notification: Compensation can only be arbitrated according to the type of expenses made by the complaining party, and only those that could be proved.
 No additional, unproved compensation could be arbitrated.

| EXPENSES | YES/NO | DATE OF EXPENSES | VALUE OF EXPENSES* (will be valid only with receipts attached to this OCA) | CLARIFICATION |
|------------------|--------|---------------------|--|---------------|
| OP/EP fee | | | | |
| Travel Expenses | | | | |
| Health Insurance | | | | |
| Visa Expenses | | | | |
| Other expenses | | | | |

Current Case Situation

| Current Situation | | |
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| Current Situation | | |

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Contact Information

ECBs raising an Official Case Application are responsible to provide contact numbers and email addresses of all the parties involved so that ICB can contact them directly if needed.

| Name | Name | |
|---------------|---------------|--|
| Role/Title | Role/Title | |
| Email address | Email address | |
| Name | Name | |
| Role/Title | Role/Title | |
| Email address | Email address | |

ECB Chair and MC Signature

| I, as complaining party, confirm this case has been brought forth to the ICB for arbitration. I, as the complaining party, will accept the solution and decision the Internal Control Board will make after analysis of the case. I, as complaining party, understand all the venues for appeal and will use them appropriately. | I, as responding party, will accept the solution and decision the Internal Control Board will make after analysis of the case. I, as responding party, understand all the avenues for appeal and will use them appropriately. |
|--|--|
| Date, Full name, Signature (scan is acceptable) | Date, Full name, Signature (scan is acceptable) |

International Control Board Space (do not fill)

| CLAIM | | VERDICT |
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| RECOMMENDATIONS AND OR I | MANDATORY AC | TIONS |
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| COMPENSATORY ACTIONS | | |
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| ICB FINAL VERDICT | | |
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| OFFICIAL CASE LOSSES | | |
| (X) Case(s) lost by AIESEC in xxx in | n this document. | |
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| MEMBER OF CUSTOMER S | UPPORT | TEAM LEADER OF CUSTOMER SUPPORT |
| Date, Full name, Signature (scan is a | acceptable) | Date, Full name, Signature (scan is acceptable) |
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