



Legal Guardianship details form (for international students)

This form should be filled in if you will be acting as a legal guardian for a student at Swansea College who is under the age of 18.

This form must be completing on admission to the college.

1. Student Details

Title: Mr / Mrs/Miss

Gender: Male / Female

First Name(s): _____

Surname: _____

Nationality: _____

Main Language Spoken: _____

Date of Birth: __/__/__

Age: __

2. Contact Address

Current Address in the UK

House/Flat No: _____

Street: _____

City: _____

Post Code: _____

Home Telephone: _____

Mobile Telephone: _____

Current Email: _____

3. Guardian Details

Title: Mr / Mrs/Miss

Gender: Male / Female

First Name(s): _____

Surname: _____

Nationality: _____

Main Language Spoken: _____

Date of Birth: __/__/__

Age: __ Occupation: _____

Relationship to student: _____

4. Guardian Contact Address

Current Address in the UK if different to student

House/Flat No: _____

Street: _____

City: _____

Post Code: _____

Home Telephone: _____

Mobile Telephone: _____

Current Email: _____

Confirmation of guardianship

I have read and agreed to Swansea Sixth form College guardianship guidelines

Print name: _____

Sign: _____

Date: _____

Please circle one of the following

I agree / I do not agree for _____ to being photographed / filmed.

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STUDENT NAME:

Name of student: _____

UNDER 18 PARENT/LEGAL GUARDIAN CONSENT FORM

Dear Swansea College

Please accept this letter as confirmation that I am the legal parent or guardian of the above named student.

I confirm that _____ is the legal parent or guardian of the above named student.

1: I have read the guidance for under 18's.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/236264/special_guardianship_guidance.pdf

2: I will ensure the student has all of the documents required for travelling.

3: I Have read and agree to the terms and conditions available on the application form.

4: I will keep you informed of any changes to my contact details.

5: I authorise the student to take part in all social activities organised by the school suitable for under 18 year olds.

7: I have informed you of any existing Physical, Mental or Learning Disability of the student in the application form.

8: I authorise the student to travel un-supervised to and from their accommodation or social activities organised by the school.

8a: If you have answered NO to the above question, can you please provide us with details of who will be responsible for your child's travel to and from the school?

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Please answer YES or NO to the following:

9: I require information and my written consent for any participation in student leisure activities. Yes / No

10: I authorise the student to participate in organised activities, outside of the normal school hours. Yes / No

11: I require notification of any absence from classes. Yes / No

12: I require a written report at the end of the course. Yes / No

If you would like to add any further information or have any further questions, please do so below:

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I have fully understood each of the questions above and have answered them truthfully.

Print: **Parent / Guardian**

Signed:

Date:

<p>Office Use only Signed by member of staff: _____ Date: _____</p>
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