**Parental consent form for students aged under 18**

We want to make sure that your child is safe and happy while studying in the UK. To help us, we ask you (the parent or legal guardian) to complete this form for any student aged under 18 who is enrolled at Richard Language College.

Please note that the student will not be able to start the course until the form is received by Richard Language College.

**Data protection**

We promise to keep this information secure and will only give it to people who are directly involved in caring for your child on a need-to-know basis during the time when they are enrolled at Richard Language College; this may include healthcare and welfare professionals.

**Student details:**

|  |  |
| --- | --- |
| First Name(s): |  |
| Family name: |
| Gender: | Male  Female |
| Date of birth: |
| Nationality: |
| First language: |
| Passport number: |
| Passport expiry date: |

**Parents’ or guardian’s details**

|  |  |
| --- | --- |
| **Primary contact:** |  |
| Title: |
| First name: |
| Family name: |
| Relationship to child: |
| First language: |
| Level of English: | Weak  Good  Strong |
| Address: |
| Mobile phone: |
| Email: |

|  |  |
| --- | --- |
| **Secondary contact:** |  |
| Title: |
| First name: |  |
| Family name: |  |
| Relationship to child: |  |
| First language: |
| Level of English: | Weak  Good  Strong |
| Address: |  |
| Mobile phone: |  |
| Email: |  |

I give consent for my son/daughter to travel to the UK and study at Richard Language College

I understand my child will travel unaccompanied between the school and his/her homestay.

I agree that my son/daughter can travel unaccompanied to and from Bournemouth at the start and end of their course and from the homestay/school to airport/station on departure from the centre.

**Only children aged 16 and 17** YES  NO  Not applicable

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Details to UK**: Flight no. |  |  | **Return details**: Flight no. : |  |
| UK airport: |  |  | Airport: |  |
| Date: |  |  | Date: |  |
| Departure Time: |  |  | Departure Time: |  |
| Arrival Time: |  |  | Arrival Time: |  |

**Accommodation**

**A**: I agree to my son/daughter staying in homestay arranged by Richard Language College . **If no, see B:**

YES  NO

He/she understands that he/she must follow the ‘school and house rules’. YES

**B:** If your son/daughter is staying with family members or is in accommodation arranged by yourself, please give full details:

|  |  |
| --- | --- |
| Name of responsible adult in the accommodation: |  |
| Date of birth: |  |
| Relationship to the child: |  |
| Address: |  |
| Mobile phone: |  |
| Email : |  |

(Please see College Safeguarding Policy & See Rules for Under 18s)

**Curfew times**

I agree the following times when my son/daughter must be in their accommodation: YES  NO

**Under 14 years of age**. They must not go out in the evening and weekends without an accompanying responsible adult.

**14 & 15 years old.** They must be back with your homestay host by 21.30.

**16 & 17 years old.** They must be back with your homestay host by 23.00..

**If NO**, then what earlier time is required for your child?

**Leisure activities**

I give permission for my son/daughter to go on any trips organised by Richard Language College and to take part in these activities, under supervision

|  |  |  |
| --- | --- | --- |
| Swimming i. in the sea independently (**16 years and over only**)  ii. in the sea – with responsible adult (**12-15**)  iii. in a lifeguarded pool (**12-17 years**) | YES  YES  YES | NO  NO  NO |
| Cycling (**16 years and over only**) | YES | NO |
| Ball games | YES | NO |
| Water sports Supervised by venue staff in addition to RLC staff. | YES | NO |
| Adventure sports (high ropes, rock-climbing, abseiling etc.)  Supervised by venue staff in addition to RLC staff. | YES | NO |
| Horse-riding Supervised by venue staff in addition to RLC staff. | YES | NO |
| Archery Supervised by venue staff in addition to RLC staff. | YES | NO |
| Ice-skating Supervised by venue staff in addition to RLC staff. | YES | NO |

**Unsupervised time**

|  |  |  |
| --- | --- | --- |
| I give permission for my son/daughter to have free **unsupervised** time for shopping on trips arranged by Richard Language College **(16 & 17 years only)** | YES | NO |
| I give permission for my son/daughter to have **unsupervised** free time in Bournemouth during the time between the end of classes/activities [16:00 approximately ] and the time of the evening meal at their accommodation **(14-17 years only)** | YES | NO |
| I give permission for my son/daughter to have **unsupervised** free time in the evening after the evening meal and at weekends [see curfew details]. **(14-17 only)** | YES | NO |
| I give permission for my child to go on day trips independently **(16 & 17 years only)** | YES | NO |
| I give permission for my child to go on day trips with the homestay host **(12-17 years)** | YES | NO |

**Medical**

Please tell us about any problems. If we are **not** told in advance about a physical or mental condition, we reserve the right to terminate the student’s course.

**Does your son/daughter have:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Asthma or bronchitis | YES | | | NO |
| Heart Condition | YES | | | NO |
| Fits, fainting or blackouts | YES | | | NO |
| Severe headaches | YES | | | NO |
| Diabetes | YES | | | NO |
| Allergies to known medicines | YES | | | NO |
| Other allergies e.g. materials, food, plasters | YES | | | NO |
| Travel sickness | YES | | | NO |
| Bed-wetting/incontinence | YES | | | NO |
| Any mental health problems (including eating disorders, hyperactivity) | YES | | | NO |
| Is your son/daughter on regular medication | YES | | | NO |
| Does your son/daughter require regular hospital treatment | YES | | | NO |
| Does your son/daughter take any medication which he/she will bring with him/her | YES | | | NO |
| Is there anything else we should know about | YES | | | NO |
| If the answer to any of the questions above is **YES**, please give details: | | | | |
| In case of minor pain or illness such as headache, mild cold or sore throat, do you  agree to your son/daughter being given non-prescription medication such as  Paracetamol, cough medicine, throat pastilles, antihistamine or travel sickness tablets? | | YES | NO | |
| In case of an emergency do you give permission for a responsible person in  Richard Language College or in the student‘s accommodation to arrange medical treatment.  Of course, every effort will be made to contact you, the child’s parents/guardians,  as quickly as possible. | | YES | NO | |

**Attendance**

Students are expected to attend all scheduled classes and activities and to be in their accommodation at the stated times. If you wish your child to be absent from the course at any time, please contact Richard Language College directly so that suitable arrangements can be made.

**Photographs and video clips**

I understand that Richard Language College may take photographs or video clips of students during class or leisure activities and that these images may be used in the Richard Language College publicity or on its social media site.

|  |  |  |
| --- | --- | --- |
| I consent for images to be taken. | YES | NO |
| I consent for images to be used in Richard Language College publicity. | YES | NO |

**Long-stay students** Over 5 weeks

Details of student’s doctor in home country:

|  |  |  |  |
| --- | --- | --- | --- |
| Title: |  | | |
| Name: |  | | |
| Address: |  | | |
| Telephone: |  | | |
| Email: |  | | |
| When did your son/daughter last have a tetanus injection? | | Date: : | |
| I give permission for my son/daughter to be registered with a doctor (General Practitioner) in the UK. | | | YES  NO |

**Students aged 16 and 17 who are enrolled on adult courses**

I understand that:

* my son/daughter will come into regular contact with other students over the age of 18, in class and during the leisure programme
* he/she is responsible for buying their own lunch during the week, except if it is included in the course fee (Young Learner courses).
* there are certain British laws (e.g. related to smoking and drinking alcohol) that apply to people aged under 18. As a consequence, there may be some leisure activities which my son/daughter cannot take part in because of their age.

**Consent**

I confirm that the above details are accurate and complete.

I agree to the terms and conditions

I have discussed the agreed arrangements and rules with my son/daughter.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of the parent/guardian:**

I have discussed the agreed arrangements and rules with my parent/guardian.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of the student:**

This document will be considered signed if sent from the parent/ guardian’s email.