

PARENTAL CONSENT FORM FOR STUDENTS AGED UNDER-18



PARENTAL CONSENT

 EXPRESS
ENGLISH
COLLEGE
MANCHESTER, UK

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 Express English College. Please note that the student will not be able to start the course until the form is received by the Express English 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 the college this may include healthcare and welfare professionals.

STUDENT DETAILS



First name:

Family name:

Date of birth:

Gender: Female

Male

Nationality:

Passport number:

Passport expiry date:

First language:



TRINITY
COLLEGE LONDON
Registered Exam Centre 69283



PREPARATION
COURSES
FOR
TRINITY
COLLEGE LONDON
Secure English
Language Tests



Accredited by the
BRITISH COUNCIL
for the teaching
of English in the UK



Member of
Greater Manchester
Chamber of Commerce



EXPRESS ENGLISH COLLEGE

PARENTS OR GUARDIANS DETAILS



1.

First name:

Family name:

Relationship to child:

First language:

Level of English:

Address:

Mobile phone:

Email:

2.

First name:

Family name:

Relationship to child:

First language:

Level of English:

Address:

Mobile phone:

Email:

Emergency contact number:



TRAVEL

I give consent for my son/daughter to travel to the UK and study at the college. I agree that my son/daughter can travel unaccompanied:

1 To and from Manchester at the start and end of their course. Yes No

2 Between the school and their [home/homestay/hall of residence]. Yes No



3.From airport/station etc to the centre at the start of the course.

Details, Flight no. Airport

Yes No

Time .

4-From school to airport/station on departure from the centre.

Yes No

ACCOMMODATION



I agree to my son/daughter staying in arranged by the college: Yes No

He/she understands that they must follow the 'school and house rules'. Yes No

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:

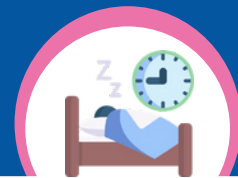
Relationship to the child:

Address:

Mobile phone:

Email:

CURFEW TIMES



I agree the 23:00 when my/son daughter must be in their accommodation: Yes No



LEISURE ACTIVITIES



I give permission for my son/daughter to go on any trips organised by the college, and to take part in these activities, under supervision of the Activity leader.

Football game

Yes

No

Yes

No

Adventure sports (high ropes, rock-climbing, abseiling etc.)

Yes

No

UNSUPERVISED TIME



I give permission for my son/daughter to have free time for shopping on trips arranged by the college

Yes

No

I give permission for my son/daughter to have unsupervised free time in Manchester during the time between the end of classes/activities [times vary based on the course booked, You will be notified about this in your welcome email] and the time when the student returns to their accommodation (Subject to curfews 11:00 pm)

Yes

No

I give permission for my son/daughter to have unsupervised free time in the evening after the evening meal and at weekends [subject to curfews]. [within 2 miles of express English college in the weekends]

Yes

No

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. Please be informed that the school does not hold responsibility for student supervision during unsupervised intervals. Students and their guardians are kindly advised to make necessary arrangements for their welfare and safety during these periods.



MEDICAL



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 the College or in their 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 college directly so that suitable arrangements can be made.

PHOTOGRAPHS AND VIDEO CLIPS



I understand that college may take photographs or video clips of students during class or leisure activities and that these images may be used in the 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 the college's publicity.

Yes No

Images will be posted in the college's noticeboard as well as the website and the social media (Twitter, Instagram, Facebook)



LONG-STAY STUDENTS 11 MONTHS



Details of student's doctor in home country:

First name:

Last 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 BETWEEN 16 and 18 WHO ARE ENROLLED WITH ADULT STUDENTS



I understand that:

- 1- My son/daughter will come into regular contact with other students over the age of 18, in class and during the leisure program. Yes No
- 2- My son/daughter is responsible for buying their own lunch during the week Yes No
- 3- 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. Yes No
- 4- Express English College does not hold responsibility for student supervision during unsupervised intervals. Students and their guardians are kindly advised to make necessary arrangements for their welfare and safety during these periods.

Yes No



CONSENT



I confirm that the above details are accurate and complete.

Yes No

I agree to the terms and conditions.

Yes No

I have discussed the agreed arrangements and rules with my son/daughter. Yes No

Guardian/Parent Name

Signature of the parent/guardian:

Date

I have discussed the agreed arrangements and rules with my parent/guardian. Yes No

Student Name

Signature of the student:

Date

For further information, please review the [safeguarding policy](#) and [U18 Handbook](#)

Kindly fill out the form, attach it along with any other required documents, and send it via email to info@expressenglishcollege.co.uk.



TRINITY
COLLEGE LONDON
Registered Exam Centre 69283



PREPARATION COURSES FOR TRINITY
Secure English Language Tests



Accredited by the
BRITISH COUNCIL
for the teaching
of English in the UK



Green Standard Schools



Member of
Greater Manchester
Chamber of Commerce



EXPRESS ENGLISH COLLEGE