



16 + Consent to Travel and Study Form

Under UK law, all people under the age of 18 are regarded as children. For this reason, we require students who are under 18 years old to obtain consent from a parent or guardian before studying at Oxford ILS.

This form covers the relevant areas for which we require consent. Please complete the spaces and tick relevant boxes where appropriate.

PERSONAL INFORMATION OF THE PARENT		
Student's full name:	Start date of study (DD/MM/YY):	End date of study (DD/MM/YY):
Parent's name:	Parent's nationality:	
Street and house number:	Town/City with postcode:	
Country:	Email:	
Telephone no. of parent:	Emergency mobile no. of parent:	

COURSE CONSENT FOR STUDENTS ENROLLED ON ADULT COURSES
<p>1. I the parent/guardian hereby give consent for the student named above of this Form to travel to the UK for the purpose of studying at Oxford ILS.</p> <p><i>Please Note: Your child will not be supervised by Oxford ILS staff: During travel to/from the School, during travel to/from the homestay provider, during any other time outside of the scheduled timetable or scheduled activities, and when not in their homestay provider accommodation.</i></p> <p><input type="checkbox"/> I understand and agree (please tick).</p>
<p>2. Oxford ILS advises for students aged 16-17 years old to be collected and dropped-off at the airport on arrival and departure.</p> <p>Please tick one:</p> <p><input type="checkbox"/> I am arranging own transport for my child. <input type="checkbox"/> I would like Oxford ILS to arrange transport for my child (additional fees apply). <input type="checkbox"/> I give consent for my child aged 16 or 17 to travel independently to and from the airport.</p>
<p>3. <i>I hereby give my consent for the student named above on this Form to attend adult classes on the dates stated, and to be treated as an adult in accordance to UK legislation.</i></p> <p><input type="checkbox"/> I understand and agree (please tick).</p>
MEDICAL INFORMATION AND FIRST AID CONSENT
<p>If the student needs First Aid, medical treatment including an anaesthetic or operation, I give permission for Oxford ILS to arrange this.</p> <p><input type="checkbox"/> I understand and agree (please tick).</p> <p>Students are required to make their own arrangements for Personal Insurance in case of illness, accident or repatriation costs.</p> <p><input type="checkbox"/> I understand and agree (please tick).</p>

ACCOMMODATION ARRANGEMENTS (please complete if you are arranging your child's accommodation)

<p>If Oxford ILS is NOT arranging the student's accommodation, please give us details of the accommodation where the student will stay in the UK.</p>	<p>Name of the guardian responsible for my child in the UK:</p>	<p>Guardian's date of birth (DD/MM/YY):</p>
	<p>Address:</p>	
	<p>City with postcode:</p>	
	<p>Relationship to the student:</p>	
	<p>Telephone/mobile number:</p>	
	<p>Email address:</p>	

Oxford ILS is not responsible for accommodation that has not been booked through the School.

I understand and agree (please tick).

I consent and agree that the person named above (guardian in the UK) has full responsibility for my child (when not at the School) and can be contacted in case of an emergency.

I understand and agree (please tick).

I, the parent and guardian of the child will provide you with a copy of our passports, if the child requires a visa.

I understand and agree (please tick).

ADDITIONAL INFORMATION

Please write any information that may be relevant for your child attending an adult programme:

DECLARATION

By signing this form I agree that:

- I have completed the form with the information to the best of my knowledge.
- The School may contact me, if necessary.
- I understand that my child has to comply with the **Student Code of Conduct, Terms and Conditions for Adult courses and the Student Welfare Policy** available on the website. I understand that if he/she is in breach of these regulations the School may take disciplinary action against him/her.
- I will ensure that Oxford ILS is kept notified of my current address at all times while my child remains a student at Oxford ILS.
- I have read and understood the **Oxford ILS Privacy Policy**.
- I have read and understood **Oxford ILS Safeguarding Policy Information for Parents and Guardians**.
- If the student needs First Aid or medical treatment including an anaesthetic or an operation, I give permission for Oxford ILS to arrange this.

<p>Signature of student:</p>		<p>Signature of parent:</p>	
<p>Date: DD/MM/YY</p>		<p>Date: DD/MM/YY</p>	

**To return the form please scan and email to: info@oxford-school.co.uk, or send by post to:
 Oxford International Language School,
 The Old Music Hall, 106-108 Cowley Road, OX4 1JE, Oxford, United Kingdom**