



## **JUNIOR STUDENT WELFARE AND CONSENT FORM**

*To be completed by parent or guardian of under-18 students  
Please write in CAPITAL LETTERS- use additional sheet if necessary*

The information you give on this form will only be shared with Riviera English School staff or hosts on a "need-to-know" basis. It will not be shared with anyone else, including other students. You do not have to complete every section if you prefer not to give the information requested. This form will be kept in your child's student file in a lockable cabinet for the duration of their stay. After your child's departure from the school, their student file will be archived in a lockable storage room and kept for a maximum of five years. You can ask to see this form at any time. You can ask for the information we keep about your child to be deleted at any time. Please give your consent for us to keep this information and share as necessary at the end of this form.

### **Information about your child:**

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Course Dates: From \_\_\_\_\_ To \_\_\_\_\_

Nationality: \_\_\_\_\_ Passport/ID No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age during course: \_\_\_\_\_ Male/Female: \_\_\_\_\_

Home Address *(in your country)*: \_\_\_\_\_

*We ask for this in case we need to send you anything.*

\_\_\_\_\_ Your email: \_\_\_\_\_

Your child's mobile telephone number: (+ \_\_\_\_\_ ) \_\_\_\_\_

*We ask for this in case we need to contact your child for safety reasons.*

Your telephone number: (+ \_\_\_\_\_ ) \_\_\_\_\_

*We ask for this in case we need to contact you in an emergency or similar.*

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### **Who can we contact in an emergency? (should be contactable 24 hours)**

*We ask for this in case we need to contact you in an emergency or similar.*

1. Name: \_\_\_\_\_ Relationship *(mother; friend...)* \_\_\_\_\_

Telephone number: (+ \_\_\_\_\_ ) \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship *(mother; friend...)* \_\_\_\_\_

Telephone number: (+ \_\_\_\_\_ ) \_\_\_\_\_

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### **Medical Conditions/Allergies:**

*We ask for this information so that we can help your child with any medical problems.*

Is your child allergic to any medicines: YES / NO Please give more information: \_\_\_\_\_

*For example: penicillin, paracetamol*

Is your child allergic to any food: YES / NO Please give more information: \_\_\_\_\_

*For example: nuts, gluten, lactose, citrus*

Is your child allergic to anything else: YES / NO Please give more information: \_\_\_\_\_

*For example: pollen, pet hair*

Does your child have any medical conditions that we should know about: YES / NO

*For example: diabetes; epilepsy; asthma; bed-wetting*

Please give more information: \_\_\_\_\_

Does your child carry any medication every day: YES/NO Please give more information: \_\_\_\_\_

*For example: inhaler; epi-pen; heart medicine*

Does your child have any conditions that may cause problems with learning: YES/NO

*For example: dyslexia; sight problems; hearing problems*

Please give more information: \_\_\_\_\_

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**School/Social Programme:**

Do you consent to your child participating in scheduled supervised evening activities? YES / NO

*If no, your child must stay at home with their host (host family) during scheduled evening activities.\**

Do you consent to your child going out in the evenings when there is no supervised scheduled activity? YES / NO

*If no, your child must stay with their host when there are no scheduled evening activities.\**

*If yes, your child must return to their homestay by Riviera English School's curfew times: 13/14 year-olds 21.30, 15/16/17 year-olds 22.00\**

Do you consent to your child having some unsupervised time during school breaks and on some activities? YES / NO

*If no, your child must stay in school during break and lunch times, or with the leader at all times during excursions/activities.\**

Do you consent to your child travelling to/from school without an adult (students 13+)?\* YES / NO

*If no, there will be extra costs to you for taxi payments, staff to accompany or hosts to transport.*

Can your child swim? YES / NO

*\*11 & 12 year-olds: The school may agree to a limited number of students aged 11 and 12 to attend as part of a group or with their parents if the group leaders or parents agree to accompany these students when they are not in school. This includes to/from school and activities. Unaccompanied free time is not permitted by the school for these students.*

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**Consent:**

1. Occasionally we take photos of students during lessons or on activities to use in our publicity (Facebook, website etc). Do you consent to us using your child's image in our publicity? YES / NO

2. Do you consent to the information on this form being shared with Riviera English School staff and hosts if necessary and to ensure appropriate care for your child? YES / NO

3. Do you consent to this form being stored by Riviera English School? YES / NO

4. In the case of illness or medical emergency, do you consent to your child's medical information being shared with those who need to know? YES / NO

I will inform the school of any changes to the above information. YES / NO

My child and I understand that alcohol and cigarettes are not allowed at any time. YES / NO

My child and I understand that attendance at all classes and activities is compulsory and that lessons and activities can only be missed in the case of illness. YES / NO

My child agrees to follow the rules of the school and the homestay. YES / NO

I have been fully informed about the course, the programme, the accommodation arrangements, travel to/from school, transfers, potential free-time and I give my full permission for my child to attend. YES / NO

Signed: \_\_\_\_\_ Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Date: \_\_\_\_\_

If you would like to, you can use the space below to tell us anything else that you think we should know about.