

Under 18 Parent Consent Form

I, the undersigned, _____ (parent/legal guardian's full name)
hereby give my consent for my child, _____ (student's full name & student ID),
to stay away from Homestay for the dates: _____ (specify dates)
to live at _____ (home address).

I understand that _____ (main contact who student will stay with)
will take all reasonable precautions for the safety and well-being of my child during this stay away.

I acknowledge that the supervising adults will have the authority to make medical decisions in case of an emergency if I cannot be reached. I have provided accurate and up-to-date contact information for emergency purposes.

I also understand that Deakin College will not be held responsible for any unforeseen events or circumstances that arise during my child's stay away from homestay.

Parent/Guardian's signature: _____ Date: _____

Deakin College signature: _____ Date: _____