



## Guardianship Form

It is a School requirement that whenever parents are not in the UK they should appoint a Guardian to represent their children's needs. This Guardian cannot be the parent of the child, must be over the age of 18 and we recommend they are over the age of 25. They cannot be a brother or sister if they live in University accommodation. The Guardian should reside in the UK during term time. The School cannot advise on the appointment of a Guardian. If selecting a private Guardian, it is recommended that parents request three references, verify them and obtain a Disclosure and Barring Service (DBS) Enhanced Clearance Certificate on all members of the household over the age of 16.

The School's expectations of the role of any Guardian are set out below. These responsibilities can be jointly allocated between parents and Guardians.

- Act as a point of contact for parents, children and the school
- To act on behalf of the parents in the event of a crisis and, where possible care, for a child in the event of temporary school closure.
- To provide children with educational and pastoral support (including attending matches, concerts etc.)
- Attend Parents' Meetings
- Provide suitable accommodation for half terms and weekend leave-outs
- To liaise with the school with regard to leave-out and holiday arrangements
- To be responsible for liaising with the School regarding travel arrangements
- To be available to liaise with the School Nurse and parents
- To accompany the child to medical appointments whenever possible

\*we would normally expect a child to return to spend the longer breaks with their family or return to the family home.

**I confirm that the adult named below has been appointed to act on my/our behalf as Guardian for the above on the occasions when I am/we are abroad.**

Child/Children's Name(s): \_\_\_\_\_

Guardian's Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Guardian Home address: \_\_\_\_\_

Email address: \_\_\_\_\_

Tel. No.s Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Parents' Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Saint John's

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college school

Child's Name: \_\_\_\_\_

Please set out your intentions for the role of your chosen Guardian in relation to the points below for the above mentioned child (please tick yes or no for each statement as appropriate):

	YES	NO
Act as a point of contact for parents, children and the School		
Act on behalf of the parents in the event of a crisis and, where possible, care for a child in the event of temporary school closure		
Provide children with educational and pastoral support (including attending matches, concerts, etc.)		
Attend Parents' Meetings		
Provide suitable accommodation outside of school hours		
Liaise with the School with regard to leave-out and holiday arrangements		
Be available to liaise with the School Nurse and parents		
Accompany the child to medical appointments whenever possible		
(Supplementary) Should copies of reports also be sent to the child's Guardian?		

If No, it is assumed that the parent(s) will undertake these duties

Parent's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Guardian's Signature \_\_\_\_\_ Date: \_\_\_\_\_