

# SCL INTERNATIONAL COLLEGE

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## PARENTAL CONSENT FORM FOR STUDENTS UNDER 18

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 at SCL International College.

Please return the completed form at least 10 days prior to arrival

### 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 school; this may include healthcare and welfare professionals.

### Student Details

First Name:

Family Name:

Gender:

Date of Birth:

Nationality:

First Language:

Passport Number:

Passport Expiry Date:

Mobile Number:

Email Address:

### Parent/Guardian Details

First Name:

Family Name:

Relationship to Child:

First Language:

Address:

Mobile Number:

Email Address:

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Stay Campus London Ltd. - c/o Hallmark Estates Limited, 46 Great Marlborough Street, Soho, London W1F 7JW, United Kingdom  
Tel: +44 (0)203 141 7539 | Company Number: 09877237

Web: [www.sclinternationalcollege.com](http://www.sclinternationalcollege.com) | Email: [info@sclinternationalcollege.com](mailto:info@sclinternationalcollege.com)

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Emergency Contact Details (if parent/guardian is unavailable, must be an English speaker)

First Name:

Family Name:

Relationship to Child:

First Language:

Address:

Mobile Number:

Email Address:

## Travel

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

To and from London at the start and end of their course

yes  no

**Only available for children aged 16 and over.**

Between the school and London city during their stay

yes  no

**Only available for children aged 16 and over.**

## Arrival Details

Name of the person/taxi company meeting the student at the airport:

Relationship to the student :

Contact Number:

Student Contact Number:

## Departure Details

Name of the person/taxi company meeting the student at the airport:

Relationship to the student :

Contact Number:

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## On-Site Accommodation

I agree to my child/ren staying in accommodation provided by SCL International College:

yes  no

He/she understands they must follow the school and house rules:

yes  no

If 16 or over, I give permission for he/she to share a room with someone aged 18 or over:

yes  no

If under 16, I give permission for he/she to share a room with someone who is 16 or 17:

yes  no

## Private Accommodation

If your son/daughter is staying with family members or is in private accommodation arranged by yourself, please give full details:

First Name:

Family Name:

Date of Birth:

Relationship to Child:

First Language:

Address:

Mobile Number:

Email Address:

The school Safeguarding Policy has specific rules about students staying away from school-organised accommodation and the minimum age of the person looking after them. Measures will be taken by SCL International College to check the identity of the named person or suitability of the accommodation.

## Leisure Activities

I give permission for my son/daughter to go on any trips organized by the school and to take part in activities under supervision. Any hazardous activities will be with qualified supervision.

yes  no

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## Unsupervised Time (Aged 14+)

I give permission for he/she to have free time for shopping on trips arranged by the school:

yes  no

I give permission for he/she to have unsupervised free time in London between the end of classes/activities and their evening meal at the selected accommodation:

yes  no

I give permission for he/she to unsupervised free time in the evenings and weekends to abide by the curfews as set out below:

yes  no

- Under 14s – not allowed out unsupervised at any time.
- Aged 14–15 – 21.30/9.30pm
- Age 16+ – 22.00/10pm

## Medical

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.

Does he/she have:

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| • Asthma or Bronchitis  | yes <input type="checkbox"/> | no <input type="checkbox"/> |
| • Heart Condition   | yes <input type="checkbox"/> | no <input type="checkbox"/> |
| • Fits, fainting or blackouts   | yes <input type="checkbox"/> | no <input type="checkbox"/> |
| • Severe headaches  | yes <input type="checkbox"/> | no <input type="checkbox"/> |
| • Diabetes  | yes <input type="checkbox"/> | no <input type="checkbox"/> |
| • Allergies   | yes <input type="checkbox"/> | no <input type="checkbox"/> |
| • Travel sickness   | yes <input type="checkbox"/> | no <input type="checkbox"/> |
| • Bed wetting/incontinence  | yes <input type="checkbox"/> | no <input type="checkbox"/> |
| • Any mental health disorders<br>(Including eating disorders and hyperactivity) | yes <input type="checkbox"/> | no <input type="checkbox"/> |

Is he/she on regular medication? yes  no

Does he/she require regular medical treatment? yes  no

Does he/she take any medication that they are bringing with them? yes  no

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Is there anything else we should know about? yes  no

If you answered yes to any of the questions, please give further information here:

[Click or tap here to enter text.](#)

In case of minor pain or illness, such as a headache, mild cold or sore throat, do you agree to he/she being given non-prescription medication such as paracetamol; cough medicine; antihistamine; travel sickness tablets? yes  no

In case of emergency do you give permission for a responsible adult in the school or accommodation to arrange medical treatment? yes  no

**Every effort will be made to contact you as quickly and early as possible.**

When did he/she last have a tetanus injection?

A Personal Emergency Evacuation Plan (PEEP) may be needed by anyone with mobility issues, visual or hearing impairments or any disability or state (e.g., pregnancy) affecting their ability to leave the building, in the event of an emergency.

Does he/she need this plan? 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 the school directly so that suitable arrangements can be made.

## Photographs and Video Clips

I understand that the school may take photographs or video clips of students during class or leisure activities and that these images may be used in the school's 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 school's publicity yes  no

**These may be used on the school website, social media or as a hard copy.**

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Long-Stay Students (studying for over one month)

Details of student's doctor in their home country:

Doctors name:

Address:

Contact number:

Email address:

I give permission for he/she to be register with a doctor (general practitioner) in the UK:

yes  no

Students Aged 16 & 17 Who Are Enrolled on Adult Courses

I understand that:

- my son/daughter will come into regular contact with other students over the age of 18, in class and during the leisure programme
- he/she is responsible for buying their own lunch during the week
- 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 he/she cannot take part in because of their age.

Consent

I confirm that the above details are accurate and complete. I agree to the terms and conditions I have discussed the agreed arrangements and rules with my child/ren.

Signature of the parent/guardian:

Date:

I have discussed the agreed arrangements and rules with my parent/guardian.

Signature of the student:

Date:

Please refer to the Code of Conduct below and see the Student Handbook and Safeguarding Policy for further information.

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## Code of Conduct - Under 18s

- I will make a positive contribution whilst in the UK and will show mutual respect towards my fellow students, teachers, and staff.
- I will take, attend lessons, and actively take part in class.
- I am aware my group leader is responsible for me during my stay. I will inform them about my schedule and evening activities, and about what time I will be back at the residence.
- I understand that I must agree to the curfew time set by my school and parents.
- I will never go out alone at night and will travel in pairs or a small group. I will stay in well-lit areas and take public transport.
- As with any town or city in the world there may be no-go areas. I will ask a member of staff about these places.
- I will avoid behaving inappropriately i.e., being loud in public places.
- I will follow the UK law and not drink alcohol, take drugs or legal highs, or carry a weapon. I may be arrested if committing any of these crimes.
- I am not permitted to leave the residence overnight without being accompanied by an adult (18+) and must have written parental permission by my parent or guardian.
- I am not permitted to stay overnight in another place whilst in London.
- In case of any ongoing health problems, I will bring prescribed medicine. I will inform my group leader immediately of any sickness who will then inform the school.
- I will attend school according to my timetable. If I am going to be late, I will phone the school before 9:00 am.
- I will behave in an appropriate manner at all times. Any aggressive verbal or physical behaviour will not be tolerated, and I will be asked to leave the school and may be sent home.

SIGNATURE OF THE STUDENT:

DATE: