

Under 18 Accommodation and Care Approval Form

Note: WAIFS bears no responsibility of the parent(s) behalf provide appropriate w the age of 18.	or legal guardian(s) to e	nsure that the c	arrangements m	ade on the student's
STUDENT DETAILS				
First Name:		Last Name:		
Email:		Mobile No.:		
Date of Birth: DD/MM/YYYY		Gender:	F	М
PARENT/LEGAL GUARDIAN/NOI First Name:				
Address:		Nationality:		Permanent Resident Other
Email:		Mobile No.:		
Relationship:				
Parent	Legal Guardian		Nominat	ed Carer/Relative
 Relative refers to an individual grandparent, aunt, uncle, niece, n **Local carer refers to any responsi be responsible for the under 18 st 	ephew, step-grandparent, s ble person over the age of 2	tep-aunt, step-und 21 who is willing t	cle, step-niece or s	tep-nephew.
NOMINATED ACCOMMODATION ARRANGEMENTS Home Stay with Australian Homestay Network www.homestaynetwork.org		Living with person who is over the age of 21 and wh has been nominates as a suitable by parent/legal guardian		
Living with Parent(s)s or Leg	al Guardian(s)	Living wit	h relative(s) who	are over the age of 21
DOCUMENTATION REQUIRED 1. Certified copy of Identifica				nse or ID Card) They can be obtained fron

the Australian Post Office. Visit <u>www.checkwwc.wa.gov.au/checkwwc</u> for more information.

Please see page 3 for more information on the Additional documentation required for each nominated accommodation arrangement.



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PARENTS APPROVAL

I confirm that I/we have received a copy of the **Guardian/Carer Requirements Agreement for under-18students from WAIFS.** I confirm I have read, understood and agree to all of the information and requirements included therein.

I confirm that I/we have considered the requirements for care and welfare for under 18 students in Australia and confirm that the arrangements we are requesting meet all of those requirements.

I/We as parent(s) or legal guardian approve of the above accommodation arrangements for

(Name)_____

Signed: _____

Date:_____

NOMINATED CARER/RELATIVE OVER THE AGE OF 21 APPROVAL

I confirm that I have received a copy of the **Guardian/Carer Requirements Agreement for under-18 students** from WAIFS. I confirm I have read, understood and agree to all of the information and requirements included therein.

I confirm that I will inform WAIFS via <u>admissions@waifs.wa.edu.au</u> at least 10 working days before moving house to allow a WAIFS staff member to inspect the new accommodation to ensure it is appropriate.

I confirm I will inform WAIFS within 5 working days if any of my contact details change (including but not limited to email, phone, Skype – as appropriate)

Signed:

Date:_____

STUDENT UNDER 18 CONFIRMATION OF UNDERSTANDING

I understand and agree that I am not allowed to change my accommodation without the approval of both WAIFS and the Department of Home Affairs. I will not change my accommodation before all approvals have been given and received. I understand and agree that if an accommodation change is not approved, I cannot change my accommodation. If I move to unapproved accommodation, my visa is at risk.

Signed: _____

Date:_____



Additional documentation required for each nominated accommodation arrangement:

Living with a relative over the age of 21	Living with Parent/Legal custodian	Living with nominated person Over 21 (not	Homestay Accommodation
Confirmation of relationship with student	Proof of relationship	relative) Confirmation of address in Perth – if applicable	Confirmation of AHN Homestay application lodged
Confirmation of address in Perth	Confirmation of address in Perth – if applicable	Confirmation of approval to remain in Perth for duration of proposed study – proof of visa/citizenship	Proof of Parent/Legal Guardian Signature (passport photo ID and Signature pages)
Confirmation of approval to remain in Perth for duration of proposed study – proof of visa/citizenship	Confirmation of approval to remain in Perth for duration of proposed study – proof of visa/citizenship	Police clearance	
Police clearance	Confirmation of Student Guardian Visa Application (if applicable – Living with Parent/Legal Custodian only)	Current Working with Children Check	
Current Working with Children Check	Proof of Parent/Legal Guardian Signature (passport photo ID and Signature pages)	Confirmation of being over 21 years of age.	
Confirmation of being over 21 years of age.		Copy of parent passport with photo and signature	
Copy of parent passport with photo and signature			

OFFICE USE ONLY Check Completed by: Police Clearance received (if required)? Yes	□ □ - No N/A	Date:
Notes on check:		