

# **Under 18 Student Welfare and Accommodation Approval Form**

(This form must be completed by the parent or legal guardian for ALL students UNDER 18 YEARS of age at the time of enrolment)

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Family	name:	First Name:
Date of	Birth:Gender:	Email:
PAREN <sup>*</sup>	T/ (LEGAL GUARDIAN) DETAILS	
FULL N	ame:	<del>-</del>
Relatio	nship to the student:	
Address		
Telepho	one:Fax: _	
Mobile	Email:	
Parent,	Legal Guardian must provide proof o	f relationship to student e.g. birth certificate
As the		F ACCOMMODATION ARRANGEMENTS named student, I hereby advise that the following nave been made for my child.
Please	tick only ONE option.	
	Option 1. My child will be living with Complete only SECTIONS A, D, E	me in Australia
	Option 2. My child will be living with Complete only SECTIONS B, D, E	a relative* who is over the age of 21
	Option 3. My child will be living with Complete only SECTIONS B, D, E	a local carer** who is not a relative
	Option 4. My child will be living in Ho Complete only SECTIONS C, D, E	mestay

CRICOS Provider No. 03188C RTO Provider No. 52128	Author: Louise Edwards		Current Version: 2.0	
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- \* Relative means a relative from the following list: Brother, sister, step-parent, step-brother, step-sister, grandparent, aunt, uncle, niece, nephew, step-grandparent, step-aunt, step-uncle, step-niece or step-nephew.
- \*\* Local carer means any responsible person over the age of 21 who is willing to provide accommodation, support and be responsible for the under 18 student while living in their household.

SECTION A – PARENT or LEGAL GUARDIAN TO COMPLETE - if you have chosen Option 1 Parents or Legal Guardian contact details in Australia if the student is going to live with them.

Relationship to student or	student's family _	
Name:		
Address:		
Telephone:	Mobile	
Email:		
Nationality (circle one) Au	stralian Citizen / Permanent	Resident / Temp Resident / Other
<b>Documents required:</b> Certified copy of identifications.	ation with photo and signatu	ure. For example: Passport, Drivers license, or ID
SECTION B – RELATIVE* o	r LOCAL CARER** DETAILS –	if you have chosen Option 2 or 3
Relationship to student or Name:		Date of Birth:
	Mobile:	
Nationality (circle one) Au	stralian Citizen / Permanent	Resident / Temp Resident / Other
Documents required:  Certified copy of Identifi For example: Passport, Dri	cation with photo and signat ivers License or ID Card	ture.
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Police Clearance or Working with Children (WWC) card. Police clearances and WWCs can be

obtained from the Australian Post Office. Check www.checkwwc.wa.gov.au/checkwwc



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#### **SECTION C – HOMESTAY DETAILS**

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To be arranged by WAIFS. Please apply for Homestay accommodation by completing the Homestay Application Form available online at <a href="https://www.waifs.wa.edu.au">www.waifs.wa.edu.au</a>

## SECTION D - PARENT/ (LEGAL GUARDIAN) DECLARATION / AGREEMENT

I/We as parent/s or legal guardians agree and understand that the information provided above is part of the student's Conditions of Enrolment. I confirm that the details provided are correct and true and will inform West Australian Institute of Further Studies (WAIFS) immediately should changes occur regarding my son/daughter's guardianship or care arrangements.

ents. Students must advise WAIF ew accommodation/care arrang te a new version of this form wi ree that I shall live in the accom I am 18 years of age. I understa and I am also aware that if I chain ay be cancelled.	
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I am 18 years of age. I understa and I am also aware that if I char aay be cancelled.  Date	nd that I have to contact WAIFS nge my accommodation without
Date	e:
·	<b>:</b> :
AIFS' STUDENT ID NUMBER:	
No	N/A

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