

Parental Consent Letter



Earlscliffe

Student full name: _____

Student Date of Birth: _____

Student Nationality: _____

Student Passport number: _____

Place of study: Earlscliffe, 29 Shorncliffe Road, Folkestone CT20 2NB, UK

We hereby confirm that we are the biological parents of _____.

Our child will commence studies on ____/____/____ (insert date) at Earlscliffe, an independent boarding school in the UK, where they will reside during their time in the UK.

We also confirm that we consent to any national or international travel which our child needs to undertake between school and travelling home and the living arrangements provided by the school, as well as the reception and care arrangements upon arrival to the UK which have been agreed with the school.

We confirm that we will be financially responsible for the payment of our child's outstanding academic fees and boarding fees. The funds are available in full throughout our child's stay in the UK.

We would very much appreciate your assistance in granting our child leave to enter so that they may commence their studies in the UK.

Yours faithfully,

Mother's Signature:

Name in full:

Date:

Address:

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Father's Signature:

Name in full:

Date:

Address (if different to above)

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