



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.

STUDENT DETAILS

Family name: _____ First Name: _____

Date of Birth: _____ Gender: _____ Email: _____

PARENT/ (LEGAL GUARDIAN) DETAILS

FULL Name: _____

Relationship to the student: _____

Address:

Telephone: _____ Fax: _____

Mobile: _____ Email: _____

Parent/Legal Guardian must provide proof of relationship to student e.g. birth certificate

PARENT (LEGAL GUARDIAN) NOMINATION OF ACCOMMODATION ARRANGEMENTS

As the parent or legal guardian of the above named student, I hereby advise that the following accommodation and welfare arrangements have been made for my child.

Please tick only ONE option.

- Option 1.** My child will be living with me in Australia
Complete only SECTIONS A, D, E
- Option 2.** My child will be living with a relative* who is over the age of 21
Complete only SECTIONS B, D, E
- Option 3.** My child will be living with a local carer** who is not a relative
Complete only SECTIONS B, D, E
- Option 4.** My child will be living in Homestay
Complete only SECTIONS C, D, E

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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.

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** 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) Australian Citizen / Permanent Resident / Temp Resident / Other

Documents required:

Certified copy of identification with photo and signature. For example: Passport, Drivers license, or ID Card.

SECTION B – RELATIVE* or LOCAL CARER** DETAILS – if you have chosen Option 2 or 3

Relationship to student or student's family _

Name: _____ Date of Birth: _____

Address: _____

Telephone: _____ Mobile: _____

Email: _____

Nationality (circle one) Australian Citizen / Permanent Resident / Temp Resident / Other

Documents required:

Certified copy of Identification with photo and signature.
For example: Passport, Drivers License or ID Card

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

To be arranged by WAIFS. Please apply for Homestay accommodation by completing the Homestay Application Form available online at www.waifs.wa.edu.au

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.

Parent/Legal Custodian Name: _____

Signature: _____ Date: _____

SECTION E – STUDENT DECLARATION / AGREEMENT

Please note: It is the student's responsibility to seek approval from WAIFS for any changes to their accommodation or care arrangements. Students must advise WAIFS immediately of any changes in their residential arrangements. If new accommodation/care arrangements are made, the parent/legal guardian must complete a new version of this form with all required supporting documentation.

My parents/legal guardian and I agree that I shall live in the accommodation nominated on this form whilst residing in Australia, or until I am 18 years of age. I understand that I have to contact WAIFS before changing accommodation, and I am also aware that if I change my accommodation without informing WAIFS my student visa may be cancelled.

Student Name: _____

Signature: _____ Date: _____

Office Use Only (WAIFS):

WAIFS' STUDENT ID NUMBER:

Complete as Appropriate	YES	No	N/A
Police Clearance confirmed (if required)			
Homestay application confirmed			
CoE Sent			
Parent/legal guardian details updated on WISENET			
Local Carer Details updated on WISENET			

Check completed by:

Notes:

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