



2014-15 Parental Consent form for a student under 18 on Entry:

Please complete and return by **Monday 29th September 2014:**

Head of Student Welfare
Student Guidance Centre
Queen's University Belfast
Belfast BT7 1NN
Northern Ireland
Email: Kara.Bailie@qub.ac.uk

Name of student:	
Course of Study:	

- I understand and accept that Queen's University Belfast cannot accept full parental responsibility for my son/daughter, and have read the letter from the University outlining its policy in relation to students who are under 18 years of age on their first day of studies.
- I understand that Queen's University Belfast is not able to act in the role of a parent or guardian to my child, and that in cases of emergency the University will endeavour to contact the appointed parent / guardian, in the first instance those resident in the UK, while they remain a minor.
- I consent to Queen's University Belfast acting as a point of contact for medical professionals, and for them to disclose information to the University should my son/daughter require emergency medical treatment if it is not possible to contact a parent or an appointed UK Guardian, up to the age of 18.
- I consent, where it is not possible to contact a parent or an appointed UK Guardian, to Queen's University Belfast to be a point of contact in any dealings the above student may have with the police, either as a victim or alleged perpetrator of a criminal act, and up to the age of 18.
- I understand and accept that Queen's University Belfast is an adult environment and that the above student will generally be treated as an adult. This includes not releasing information on academic progress or personal life without the student's express permission.
- I understand and accept that Queen's University Belfast's internet and email services are provided on the principle of unrestricted access.
- I agree to accept liability for all the above student's debts to Queen's University Belfast, agreed prior to and up to the age of 18.
- I understand and accept that while studying at Queen's University Belfast, my son/daughter will be subject to UK law and the rules and regulations of Queen's University Belfast.

Please identify any specific needs or requirements for the above named student:

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I declare that I have read and accept the above conditions.

Name of signatory (parent or guardian)	
Relationship to student (e.g. mother, father, legal guardian)	

Signature (or type name if returning via email)	
Date	

In an emergency, please contact:

Name	
Telephone number	
Mobile number	
Email address	
Address	

For international students where parents are not residing in the UK or Republic of Ireland:

I have appointed the following to have guardianship of my son/daughter while they are studying at Queen's University Belfast and are under the age of 18:

This is strongly recommended, particularly for students who will turn 18 after December 2014.

Name	
Telephone number	
Mobile number	
Address	