

Education Guardianship Form

Education Guardianship Form

If Parent(s) of pupils at Bloxham School (the **School**) are resident outside the UK, the Parent(s) must appoint a UK based Education Guardian for the pupil.

This form must be completed to inform the School of the Education Guardian appointed.

Please complete two copies of this form and return one copy to the Admissions Office. Please keep the second copy for your records. Please also include a copy of the Education Guardian's passport and proof of their UK address in the form of a utility bill.

Child's details
Full name
Date of Birth
Date of Entry
Parent(s) Details
Mother's full name
Father's full name
Address
.....
.....
.....
Telephone Number
Mother's mobile number
Mother's email address
Father's mobile number
Father's email address

General

1. I/We confirm that I am/we are the Parent(s) of the above-named child and that I/we have parental responsibility for the Child in accordance with the Children's Act 1989.
2. I/We hereby acknowledge that I/we are required as a condition of our Child's place at Bloxham School (the **School**) to appoint an Education Guardian.
3. I/We acknowledge that by completing this form and returning it to the School I am/we are confirming the details of the Education Guardian I/we have appointed for the above-named Child while he/she is a pupil at the School and that should the arrangements detailed below change I/we will notify the School in writing immediately.
4. I/We acknowledge that the School has taken no part in the selection or appointment of the Education Guardian named on this form and that I/we have satisfied myself/ourselves that the Education Guardian is suitable to be responsible for the Child's welfare in the manner described.
5. I/We acknowledge that I am/we are satisfied with the insurance arrangements that have been put in place for the Child when they are in the care of the Education Guardian.
6. I/We understand that the School will not, unless negligent, be liable in respect of injury, loss, damage or costs arising out of or in any way connected with this Education Guardianship appointment.

Appointment

7. I/We have appointed the Education Guardian named below to act on my/our behalf in all matters concerning the safety and welfare of the above-named Child whilst they are attending the School.
8. I/We confirm that I/we have made arrangements to cover the costs associated with performance of the role of Education Guardian.

Authorisation

9. I/We have authorised the Education Guardian named below to:

(the following are mandatory)

- attend the School premises in case of emergency and if deemed necessary by the School provided that the Education Guardian informs the Parent(s) of what has happened immediately
- make all necessary travel arrangements including, if necessary, collecting the Child from the appropriate airport or railway station and delivering them to the School and collecting the Child from the School and delivering them to the appropriate airport or railway station at the beginning and end of each term
- ensure the Child attends school punctually each day in accordance with the School's timetable
- collect and accommodate the Child in their home in the evening and at weekends during the school term
- collect and accommodate the Child in their home in the event that the Child is unwell and unable to attend school
- collect and accommodate the Child in their home in the event that the Child is excluded for no-payment of fees or suspended for disciplinary or other reasons

- collect and accommodate the Child in their home at Exeats, half term and during holidays and at the beginning and end of term if required
- arrange and, if appropriate, attend medical appointments for the Child
- provide consent for the Child to receive emergency medical treatment if necessary
- liaise with the Housemaster or Housemistress or other members of the School staff as necessary in connection with matters related to health, welfare and educational progress of the Child
- pay all legitimate expenses incurred for the Child by the School and by the Child themselves

(the following are optional – please delete if not applicable)

- attend School events as well as sports fixtures, concerts and other performances in which the Child is participating
- receive copies of the Child’s Academic Reports and Academic Progress Grades
- receive copies of the general mailing, including invitations, medical consent forms etc

Education Guardian Details
Full name
Company name (if applicable)
Date of birth
Address
.....
.....
Home telephone number
Mobile number
Email address
Relationship to the Child

Agreement

10. By signing this form, the Education Guardian confirms his/her acceptance of this appointment by the Parent(s) as Education Guardian of the above-named Child and confirms that he/she has agreed with the Parent(s) to comply with the requirements listed above.
11. The Education Guardian confirms that he/she has agreed with the Parent(s) to take personal responsibility for the Child to the extent required and authorised above and will not delegate any of his/her responsibilities without prior written consent from the Parent(s).
12. The Education Guardian confirms that he/she has agreed with the Parent(s) to notify the Parent(s) (and, if applicable, the School) immediately in the event of any emergency involving the Child.
13. The Education Guardian confirms that he/she has agreed with the Parent(s) to notify both the Parent(s) and the School immediately if he/she is no longer willing or able to continue as the Child's Education Guardian.

Signatures			
Father	Date
Mother	Date
Education Guardian	Date
Education Guardian's paperwork required (please circle YES)	Copy of passport Proof of UK address (utility bill)	YES	YES