International Students Under 18 Excursion/Overnight Stay Permission Form



International Melbourne Polytechnic, Building A, 77 St Georges Road, Preston 3072

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International under 18s@melbourne polytechnic.edu. au

- 1. This application form is for under 18 international students only.
- 2. Please ensure all sections are completed clearly, typing or printing in BLOCK LETTERS. Missing or incorrect information may cause delays in the application process.
- 3. This form is to be used by international students under the age of 18 years in order to apply for permission from their guardian to undertake any excursion or overnight stay at an address other than approved by Melbourne Polytechnic.
- 4. A copy must be sent to internationalunder18s@melbournepolytechnic.edu.au

1. STUDENT DETAILS	
Student ID	
	mber
Email ID	
2. ACTIVITY DETAILS	
Date(s) of Excursion	
	Mobile
Email	
Destination(s) for the activity	
Address (in case of overnight stay)	
	Post Code
Telephone	Mobile
	STAY AT AN ADDRESS OTHER THAN THE APPROVED ACCOMMODATION,
PLEASE PROVIDE ADDRESS INFORMATION Address	
	Post Code
	Mobile
4.GUARDIANSHIP DETAILS	
Guardianship company name	
	Given names of approved guardian
Telephone	
•	
Approved guardian's email address	



5. MEDICA	AL AUTHORISATION
All data p	rovided by the individual shall be kept in confidence and used only in the event of an accident or emergency.
(1)	Are you taking any medication? (If yes, provide details)
(2)	Are you suffering any injury? (If yes, provide details)
(3)	Do you suffer from asthma? (If yes, provide details)
(4)	Do you have any allergies? (Food, drug or other allergies. If yes, provide details)
(5)	Are there any other medical or other conditions which staff should be aware of in relation to participating in this excursion?
(6)	Could you please provide any information which you would like Melbourne Polytechnic to take into consideration in the event of a emergency?
	ly event of an emergency, Melbourne Polytechnic/person in charge of the excursion may be required to give permission to hospital or titioners to provide treatment to the named student and to do the following:
Contact the I	pital or first aid staff with permission to provide whatever treatment necessary to facilitate the recovery of your student parents/guardians as soon as possible Homestay host compliance welfare officer
	sion to Melbourne Polytechnic to seek Medical treatment for him/her, including calling an ambulance, in case of a medical emergenc medical treatment is required.
Custodian's r	name Custodian's signature
Date:	
6.GUARDIA	N'S APPROVAL
activity off of in charge to	dge that as the guardian of the named student, I grant permission for him/her to attend excursions involving a supervise campus, which may involve the use of public transport and being in public places. In case of emergency I authorise those take any steps they may consider necessary for the safety or wellbeing of the named student, including ambulance lical treatment, hospitalisation, etc.
	signature
7. HOMEST	TAY HOST'S ACKNOWLEDGEMENT
I acknowled form.	dge and support approval of this application for an excursion or overnight stay in the accommodation detailed on this
	nost signature
	ATIONAL OFFICE ACKNOWLEDGMENT night stay permission form received
Confirmation	nigni, stay pamissionnomiteteived
John House	

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