



# INTERNATIONAL PUBLIC SCHOOL STUDENT

## > LOCAL CARER DECLARATION FORM - SECONDARY SCHOOL

This form should be completed by students under the age of 18 NOT requiring homestay, or a confirmation of approved appropriate welfare letter (CAAW).

### STUDENT DETAILS

Please print the student's name as it appears in their passport. All fields requiring date/s to be filled in DD/MM/YY format unless specified.

Title (Mrs, Miss, Ms, Mr etc): ..... Date of birth: ..... File reference number:  
 Family name: ..... Given name(s): .....

### NOMINATED PARENT (MOTHER/FATHER) DETAILS

Please enter the details of blood relative provided to Department of Home Affairs indicating who will care for the student until they reach 18 years of age.

Name(s): .....

Mobile: ..... Email address: .....

Relationship to student: .....

Please provide the address where student will be living if known.

Number + Street: ..... Suburb/City: .....

### DECLARATION

I/We declare the above information to be true.

Mother's name ..... Mother's signature:

Mother's email address ..... Mother's Mobile:

Mother's name on passport ..... Date:

Passport number ..... Expiry:

Father's name ..... Father's signature:

Father's email address ..... Father's Mobile:

Father's name on passport ..... Date:

Passport number ..... Expiry: