

Study Authorisation Form

Parental/guardian consent for a student under-18 on entry



If the prospective student will be under the age of 18 at the commencement of their IMI study, their parent/legal guardian must complete the following form to authorise their study in Switzerland.

Parent(s), legal guardian or financial sponsor:

Family name(s) _____ First name(s) _____ Male Female
Date of birth (dd/mm/yyyy) _____ Nationality _____
Place and country of birth _____
Address _____ City _____
Postal Code _____ State _____ Country _____
Home Phone _____ Mobile Phone _____
Email _____
Mother Father Guardian

Student details:

Family name(s) _____ First name(s) _____ Male Female
Date of birth (dd/mm/yyyy) _____ Nationality _____

I confirm that I am the parent/legal guardian of the above named student. I understand and accept that:

- IMI does not accept parental responsibility for my son/daughter.
- IMI is an adult environment and that my son/daughter will generally be treated as an adult.
- By virtue of this form, I agree that I have to make reasonable enquiries into the contents of the course that my son/daughter is undertaking and I consent to the activities that my son/daughter will be undertaking as a necessary part of his or her studies.
- By virtue of this form, I consent to IMI, acting on medical advice in the best interests of my son/daughter, authorising emergency medical treatment if it is not possible to contact a parent or an appointed guardian.
- IMI's internet and e-mail services are provided on the principle of unrestricted access.

Signed: _____

Date: _____

Place: _____