# **Parental Consent Form for a Student Under 18 Years on Entry**

I understand and accept that:

* The University does not accept parental responsibility for my son/daughter.
* The University is an adult environment and that my son/daughter will generally be treated as an adult.
* The University cannot release information relating to my son/daughter, either academic or personal, without my son or daughter giving the University express consent for this.
* The University’s internet and email services are provided on the principle of unrestricted access.
* While studying at The Manchester Metropolitan University my son/ daughter will be subject to the law of England and Wales and the rules, regulations and policies of the University.
* By virtue of this form, I agree that I have made 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 accept liability for my son/daughter's debts to the University and I will enter into a legally binding guarantee if requested by the University.
* By virtue of this form, I consent to the University acting on medical advice in the best interests of my son/daughter to authorise emergency medical treatment if it is not possible to contact a parent or an appointed guardian.

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| **Name of Student** |  |
| **MMU ID** |  |
| **Student Date of Birth (DD/MM/YYYY)** |  |
| **Name of Parent or Guardian** |  |
| **Relationship to Student** |  |

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

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| **Parent or Guardian contact email** |  |
| **Parent or Guardian contact phone**  |  |
| **Signature of Parent or Guardian**(handwritten signature required) |  |
| **Date** |  |

**Please return the completed form to the University Admissions Office:** applicationinfo@mmu.ac.uk

**Return of this form is a condition of offer for students who will be under 18 on entry to the University.**