

Annexure 1

Document 1

Parents' Nomination and Consent

[ID Verification of Passport/ID made on DOCUSIGN prior to accessing the forms]

I am Full Name that reads

[Parent 1 Forename has in Passport]

[Parent 1 Surname has in Passport]

as shown in my passport.

I am Full Name that reads

[Parent 2 Forename has in Passport]

[Parent 2 Surname has in Passport]

as shown in my passport.

☐ We have read the College/School Guardianship & Living Arrangements Policy dated June 2025 and accept the terms of the policy and the College/School Terms & Conditions both attached to this envelope.
We are the parents of <mark>[Student Forename] [Student Surname]</mark> Date of Birth [Student DOB] - [name as it stated on the passport], and [Student Forename] [Student Surname] will study [Course_type] from Course_Start_Date to Course_End_Date.
We confirm <mark>[Student Forename] [Student Surname]</mark> will apply for a <mark>[Visa_Type]</mark> Visa to study in the UK.
We nominate the following as the education guardian of <mark>Student Forename] </mark>
Relationship of Nominated Guardian to us: [DROPDOWN: Agency; Close Relative; Family Friend] [Parent] Chooses the option]

And if Close Relative chose from the options [otherwise choose NA]: [DROPDOWN: NA; Grandparent; Brother; Sister; Step-parent; Uncle (brother or half-brother of a child's parent); Aunt (sister or half-sister of a child's parent.

Guardian Name: [Parent]/Parent2 Type Guardian Name]

Address: [Parent1/Parent2 Type Guardian Address]

Email: [Parent1/Parent2 Type Guardian Email]

Phone: [Parent1/Parent2 Type Guardian Phone]

We confirm the nominated guardian for [Student Forename] [Student Surname] is either (1) an Agency or (2) Close Relative or Family Friend, in which case they are British or have settled status in the UK, are over 25 and not on full time education.

The Nominated Guardian has been appointed by us for the duration of the [Student Forename] [Student Surname] 's course of study as set out in the [Student Forename] [Student Surname] 's Offer Letter.

The Nominated Guardian has confirmed availability as a contact point 24 hours per day throughout the year for the College/School, will be (or in the case of an agency, will designate a host family who will be) in the country when the student is in the country and will assist with all support required including in an emergency or crisis where the College/School needs to hand over parental responsibility to another adult.

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Senior School Leckford Road Oxford OX2 6HX +44 (0)1865 688 700 senior@doverbroecks.com Sixth Form 333 Banbury Road Oxford OX2 7PL +44 (0)1865 688 600 sixthform@doverbroecks.com International School
III Banbury Road
Oxford OX2 6JX
+44 (0)1865 688 500
internationalschool@doverbroecks.con



We take responsibility to ensure [Student Forename] [Student Surname] is either living with the Nominated Guardian, or a Close Relative (as defined as a grandparent, brother, sister, step-parent, uncle (brother or half-brother of a child's parent) or aunt (sister or half-sister of a child's parent) that is a British citizen or has settled status in the UK and is 25 years or older) during holidays, weekends and/or following arrival in the UK and prior to departure from the UK, if not in the College/School boarding house and if alternatively the [Student Forename] [Student Surname] will be staying with us or with friends (who have settled status or are British, are 25 years or older and have suitable accommodation), we will notify the school and provide express consent in writing to such arrangement.
If the Nominated Guardian is not available when there is an emergency or crisis and the student is required to leave campus, we allow the school to appoint an emergency guardian for our child at our cost.
☐ We will not arrange for our child to stay in a hotel, hostel, House in Multiple Occupation (HMO) or similar arrangement and will not arrange for our child to stay in university residences or similar, whether or not our child is staying with a Nominated Guardian or Close Relative or any other approved person.
At our request and cost, the Nominated Guardian has agreed, if requested by us, to liaise with the College on our behalf in any matters relating to [Student Forename] [Student Surname] 's education and welfare (e.g. academic progress, personal issues, matters of behaviour and discipline, physical and mental wellbeing, uniform and equipment, pocket money, parents' evenings, reports etc.).
☐ We or the Nominated Guardian (with our consent) will inform the College/School in writing of arrival and departure travel arrangements at or from the College for a weekend or a longer holiday period and will provide documentary evidence of such arrangements.
We will immediately inform the College/School of any change to Student Forename Student Surname Student Surname Student Student Surname Student Student Surname Student Surname Student Student Surname St
☐ We consent to the school sharing information about our child with the Nominated Guardian if needed to support the physical, emotional and mental wellbeing of our child. This information may be safeguarding related and include medical information.
☐ We confirm we have paid or will pay all fees owing to the Nominated Guardian, if applicable, in full and on time.
If a Close Relative or a Family friend Nominated Guardian is appointed, we consent to virtual home visit verification checks on the Nominated Guardian being completed by a guardianship agency engaged by the school and for the cost to be payable by us for such checks to be made annually. If a Close Relative or a Family friend Nominated Guardian is appointed at a later date, we consent to the same checks being undertaken also at our cost. The fee for the verification checks will be invoiced separately or be added to the school's next fees invoice.
If the proposed Nominated Guardianship arrangement does not meet the conditions set out in the Guardianship & Living Arrangements Policy, the College will write to the parents to ask that an alternative arrangement be made.
If a Nominated Guardian is not appointed or has not had all vetting checks approved prior to commencement of studies and for the duration of the student's course as set out in the [Student Forename] [Student Surname] 's Offer Letter, the College shall appoint a Partner Agency (as defined in the Guardianship & Living Arrangements Policy) as [Student Forename] [Student Surname] 's Nominated Guardian on the family's behalf at the family's cost.



☐ If the nominated guardian is a close relative, I confirm that I have informed them they must provide evidence of their relationship with the student and attach the required documents to their Guardian Nomination Confirmation Form.
We have one or more 'Close Relatives' (in addition to the Nominated Guardian if the Nominated Guardian is a Close Relative) who reside in the <u>UK and have settled status in the UK or are British citizens who we consent to the [Student] staying with on weekends or in holidays</u> . Close Relatives include: a grandparent, brother, sister, step-parent, uncle (brother or half-brother of a child's parent) or aunt (sister or half-sister of a child's parent) who is aged 25 or over and not in full time education. Note that a Close Relative does not include parents.
If you have ticked yes, please provide above details for each one of the Close Relatives so they can be contacted and necessary checks: Passport/ Settled Status Evidence and a valid proof of address as per annexed document.
Signed by:
Full Name (Parent 1)
Signature
Date
Full Name (Parent 2)
Signature
Date



Document 2

Parent 1 Full Name
Parent 2 Full Name
[Insert Address]

DATE TIME
STAMP Parent 1
DATE TIME STAMP Parent 2

UK Visas and Immigration

To whom it may concern

<u>Parent Consent Letter for Student_Forename</u> <u>Student_Surname</u> - DOB: <u>Student_DOB</u> We,

Parent 1 Full Name and

Parent 2 Full Name,

are the parents of Student_Surname and we have sole and legal custody of this child. We include with this letter Student_Surname's birth certificate and official English translation as evidence of our relationship.

We give consent to Student_Surname 's Visa_Type visa application to study Course_Type at College/School. We give our full consent to all the arrangements in relation to Student_Surname studies at the College between Course_Start_Date to Course_End_Date.

We give consent to the Student_Forename Student_Surname's travel to and reception in the UK and shall provide full details of the arrangements (including documentary evidence of itinerary) prior to travel.

We give consent to the living arrangements which have been made for Student_Surname in College in the UK which are as follows: Student_Living_Arrangement

We confirm that we will financially support Student_Surname, and we give consent to Student_Surname using our funds throughout their studies in the UK.

Contact details for Student_Surname's educational Nominated Guardian in the UK:

Guardian Name: [Parent1/Parent2 Type Guardian Name]

Address: [Parent1/Parent2 Type Guardian Address]

Email: [Parent1/Parent2 Type Guardian Email]

Phone: [Parent1/Parent2 Type Guardian Phone]



Relationship of Nominated Guardian to us: [DROPDOWN: Agency; Close Relative; Family Friend] [Parentl Chooses the option]

And if Close Relative chose from the options [otherwise choose NA]: [DROPDOWN: NA; Grandparent; Brother; Sister; Step-parent; Uncle (brother or half-brother of a child's parent); Aunt (sister or half-sister of a child's parent.

We confirm them to be a British citizen or have settled status in the UK and to be 25 years or older and not be in full time education

We confirm that we consent to personal information regarding Student_Forename Student_Surname to be shared by the College with the Nominated Guardian.

Yours faithfully,

Parent1	Signed	Date
Parent2	Signed	Date



Document 3

Parent 1 Full Name
Parent 2 Full Name
[Insert

Address]

DATE TIME STAMP Parent 1 DATE TIME STAMP Parent 2

To whom it may concern

Letter of Consent to Disclose for Student_Surname, DOB: Student_DOB

We, Parent 1 Full Name and Parent2 Full Name are the parents of Student_Forename Student_Surname and have sole and legal custody of this child.

We consent to personal information regarding our child, Student_Forename Student_Surname, and their UK visa application being disclosed between Fragomen LLP, Agent, and UK Visas and Immigration ('UKVI').

In addition, we consent to Agent's use of the Fragomen Connect system for the purpose of document transfer required to support Student_Forename Student_Surname's UK visa application.

Parent1	Signed	Date
Parent2	Signed	Date



Nominated Guardian Confirmation Document 4 (Nominated Guardian)

AGENCY
I, the undersigned, will be acting as a nominated guardian for Student_Forename Student_Surname for the duration of their Course_Type at College/School from Course_Start_Date to Course_End_Date.
☐I am the authorised representative of the Guardianship Agency with the following details:
Name of company: Guardian_Agency_Name
Company registered address: Guardian_Agency_Address
My name: Guardian_Agency_Rep_Name
My title: Text
Contact email address: Guardian_Agency_Email
Contact phone number: Guardian_Agency_Phone
Accreditation : DROPDOWN: Aegis Golden Standard; BSA Full Accredited; Aegis Golder Standard & BSA Full Accredited
[Required upload of accreditation certification]
GuardianName Signed Date



Nominated Guardian Confirmation Document 4 (Nominated Guardian)

CLOSE RELATIVE/FAMILY FRIEND

[ID Verification of Passport/ID made on DOCUSIGN prior to accessing the forms]
☐I, the undersigned, will be acting as a nominated guardian for Student_Forename Student_Surname for the duration of their Course_Type at College/School from Course_Start_Date to Course_End_Date.
I am a [Guardian_Type: Close Relative/Family Friend] of Student_Forename Student_Surname's parents and my details are as follows:
Guardian Name: [Parent1/Parent2 Type Guardian Name]
Address: [Parent1/Parent2 Type Guardian Address]
Email: [Parent1/Parent2 Type Guardian Email]
Phone: [Parent1/Parent2 Type Guardian Phone]
If Close Relative, I am related to Student_Surname as follows[otherwise choose NA]: [DROPDOWN: NA; Grandparent; Brother; Sister; Stepparent; Uncle (brother or half-brother of a child's parent); Aunt (sister or half-sister of a child's parent.
I declare that:
I am a British citizen or have settled status.
[upload e-visa share code if settled status and a valid proof address as describe in annexure 4]
☐ I have no criminal record in the UK or abroad.
☐ No member of my household or regular visitor to my household has a criminal record
☐ I am 25 years old or above and I am not in full time education.
☐ I live within [2][3] hours' drive of the [College/School].
☐ I confirm that the accommodation provided is a private residence and is not operated as a commercial enterprise, such as a hotel or youth hostel.
Any changes to the accommodation will be relayed immediately to Student_Forename Student_Surname and the Parents/Legal Guardian.
I consent to ID checks and an annual virtual home visit verification check including health and safety checks being completed by a guardianship agency engaged by the College (Household Visit).
I consent to all personal information collected in the Household Visit to be shared with College/School.
☐I confirm: DROPDOWN: I'm not an education guardian to other students; I'm an education guardian to other students



☐ I have been engaged by the family for the duration of Student_Forename Student_Surname's Course_Type at College/School between Course_Start_Date to Course_End_Date.	
I will provide suitable accommodation for Student_Forename Student_Surname and an appropriate degree of care and supervision during half-term breaks, if Student_Forename Student_Surname is not enrolled in the School/College'enrichment week' activities (if provided) or going home to their parent(s) and the parents have not made other arrangements approved by the School/College.	
☐ I will provide support and promote the physical, emotional and mental wellbeing of Student_Surname . I will provide any information relevant to the safeguarding of the student to the school under confidentiality. This may include information regarding their wellbeing and medical information I am aware of.	
☐ I will be available for emergencies, am contactable 24 hours per day, and will be in th UK when Student_Forename Student_Surname is in the UK. If I will be absent, I will inform the school prior to my absence.	е
☐ I will not be an education guardian to more than two other students at any time. Details of rooming and ages of the other students to be provided at the Household Visit under confidentiality, if applicable.	



[ID Verification of Passport/ID made on DOCUSIGN prior to accessing the forms]

Document 5

Guardian Name Guardian Address]

Guardian Phonel

DATE TIME STAMP Parent 1

UK Visas and Immigration

To whom it may concern

<u>Letter of Undertaking for Student_Forename</u> Student_Surname

DOB: Student_DOB

Version for Family Friend

I, the undersigned, will be acting as a nominated guardian for Student_Surname for the duration of their studies in the UK at School/College.

I confirm that I am Student_Forename Student_Surname's family friend, and I have settled status in the UK or am a British Citizen, I am 25 years old or above and I am not in full time education.

My passport has been issued by [insert country], passport number is [passport number] and if applicable my e-visa share code is [insert]

Student_Forename Student_Surname's will reside with me outside term time for no more than 28 days at a time, and if applicable during term time on weekends or in emergencies at the following address, which is a private address, and not operated as a commercial enterprise, such as a hotel, youth hostel or House in Multiple Occupation (HMO):

Address: [Parent1/Parent2 Type Guardian Address]

I confirm that [**DROPDOWN:** I do not offer guardianship support to any other students; I am also the education guardian for other student(s)]

I confirm [**DROPDOWN:** there are no other people permanently living at my address; there are other people frequently staying at my address].

Alongside myself, please see below the details of those who live with me and frequently stay with me, if applicable:

Name: Address: Text Date of Birth/Age: Text Date of Birth/Age: Text Date of Birth/Age: Text

Contact email: Text Contact phone number: Text

[**DROPDOWN:** Other Student under my education guardianship / Resident at Nominated Guardian Address / OR Frequently stay at Nominated Guardian Address]



[allow for more than one entry]

I confirm that I, and those people listed above as living with me or frequently staying with me that are 16 years or older, [have]/[has] <u>not</u> been convicted of a criminal offence in the UK or overseas.

I confirm that the accommodation at my address is suitable for Student_Surname's, and I will take full responsibility for the wellbeing of Student_Surname's when the [Student] stays with me.

I confirm that if I become aware of any information in respect of the Student_Forename Student_Surname's the Student_Forename Student_Surname's's living arrangements or the guardianship arrangements that may impact on the Student_Forename Student_Surname's wellbeing or be contrary to published UKVI sponsor guidance and/or have a potential safeguarding risk or potential implication, I will immediately advise College/School

I confirm I will attend online safeguarding and guardianship training provided by College/School.



Guardian Name Guardian Address] Guardian Phone]

DATE TIME STAMP Parent 1

UK Visas and Immigration

To whom it may concern

Letter of Undertaking for Student_Forename Student_Surname

DOB: Student_DOB

Version for Close Relative

I, the undersigned, will be acting as a nominated guardian for Student_Forename for the duration of their studies in the UK at College/School.

I am a close relative, and I have settled status in the UK or am a British Citizen, I am 25 years old or above and I am not in full time education

My passport has been issued by [insert country], passport number is [passport number] and if applicable my e-visa share code is [insert]

I confirm my relationship to Student_Forename Student_Surname's [**DROPDOWN**; Grandparent; Brother; Sister; Step-parent; Uncle (brother or half-brother of a child's parent); Aunt (sister or half-sister of a child's parent).

Student_Forename Student_Surname's will reside with me outside term time for no more than 28 days at a time, and if applicable during term time on weekends or in emergencies at the following address, which is a private address, and not operated as a commercial enterprise, such as a hotel, youth hostel or House in Multiple Occupation (HMO):

Address: [Parent1/Parent2 Type Guardian Address]

I confirm that [**DROPDOWN:** I do not offer guardianship support to any other students; I am also the education guardian for other student(s)]

I confirm [**DROPDOWN:** there are no other people permanently living at my address; there are other people frequently staying at my address].

Alongside myself, please see below the details of those who live with me and frequently stay with me, if applicable:

Name: Address: Text Date of Birth/Age: Text Date of Birth/Age: Text Date of Birth/Age: Text

Contact email: Text Contact phone number: Text



[**DROPDOWN:** Other Student under my education guardianship / Resident at Nominated Guardian Address / OR Frequently stay at Nominated Guardian Address]

[allow for more than one entry]

I confirm that I, and those people listed above as living with me or frequently staying with me that are 16 years or older, [have]/[has] <u>not</u> been convicted of a criminal offence in the UK or overseas.

I confirm that the accommodation at my address is suitable for Student_Surname's, and I will take full responsibility for the wellbeing of Student_Surname's when the [Student] stays with me.

I confirm that if I become aware of any information in respect of the Student_Forename Student_Surname's the Student_Forename Student_Surname's's living arrangements or the guardianship arrangements that may impact on the Student_Forename Student_Surname's wellbeing or be contrary to published UKVI sponsor guidance and/or have a potential safeguarding risk or potential implication, I will immediately advise College/School

I confirm I will attend online safeguarding and guardianship training provided by College/School.



Guardian Name Guardian Address] Guardian Phonel

DATE TIME STAMP Parent 1

UK Visas and Immigration

To whom it may concern

<u>Letter of Undertaking for Student_Forename</u> Student_Surname

DOB: Student_DOB

Version for Guardianship Agency

I, the undersigned, confirm that I am an authorised representative of:

Guardian_Agency_Name appointed by Student_Surname's parents to act as a nominated guardian for Student_Surname for the duration of their studies in the UK at the College/School.

Guardian_Agency_Name agrees to care for this student and ensure any host guardian arranged by Guardian_Agency_Name shall care for this student, throughout the duration of their studies at the College.

The details of Guardian_Agency_Name are as follows:

Name of company: Guardian_Agency_Name

Date the Organisation was established: [Text: date]

Company registered address: Guardian_Agency_Address

My name: Guardian_Agency_Rep_Name

My title: Text

Contact email address: Guardian_Agency_Email
Contact phone number: Guardian_Agency_Phone

Accreditation: DROPDOWN: Aegis Golden Standard; BSA Full Accredited; Aegis Golden Standard & BSA Full Accredited

I confirm that all host families that Guardian_Agency_Name uses have a private address, which is not operated as a commercial enterprise, such as a hotel, youth hostel or House in Multiple Occupation (HMO).

I confirm that all guardians that Guardian_Agency_Name uses have a current enhanced Disclosure and Barring Check (England and Wales), Protecting Vulnerable Groups Scheme (Scotland) or Disclosure and Barring Check (Northern Ireland)

Student_Forename Student_Surname will:

DROPDOWN Will reside with the following host family; Will be allocated host family/families when required by the school/parents.

Insert the following details for each allocated Host Family, if applicable:



Name: Text Address: Text Email: Text Phone Contact: Text

Yours faithfully

Guardian Signed Date



Student Name:

Student age:

Annexure 2 - Internal form to assess change in living arrangement request

Internal assessment of change in living arrangement request

	or review. More docu	nails/recordings of suitability assessment should bumentation may be required subject to a review. Detail	Staff name and Department
1.	Date request was made:		
2.	Requested arrangement:	"Request made for [insert name] to move from a boarding arrangement to a day arrangement. Request for students to live independently at X address from X date for the duration of their studies"	
3.	Documentation provided to support request:	"If a student is residing with another individual, then their RTLW and ID if not the same" "Proof of address in form of electricity bill"	
4.	Details of assessment of suitability of requested arrangement	"Discussed in safeguarding meeting to check no concerns with living with sister. Checked with boarding house staff to see that Student was happy and no concerns. Met with Ignacio to discuss boarding and potential of living with sister to check he was happy with potential new arrangements. Email from sister to confirm she is relocating to Oxford to look after her brother."	



5. Correspondence and documentation sent to UKCT for review	"ID, RTW, POA, initial request email from parents for change and emails from sister confirming move to oxford sent to UKCT for review on 11/05/2025"	
6. Date formal consent sent to Family		
7. Date report on SMS completed		

Final	decisio	n approv	ed by AC	or above:

Date:



Annexure 3 – Parental Change of Living Arrangements Consent Letter [to be sent and signed via DocuSign]

Date:

To whom it may concern,

Student's Full Name: Date of Birth: Nationality: Passport number:

We can confirm that we are the parents of [Insert Student Name] and we have sole and legal custody of this child. We include with this letter [Student]'s birth certificate as evidence of our relationship.

We can confirm that effective from [insert date], our child will change permitted living arrangement in the UK as follows: [insert the change of living arrangement].

[His/her] address will be: [Insert Full Address] while in the UK.

We can confirm that we give our consent to [new living arrangement].

We continue to give our full consent to all the arrangements in relation to [Student's] studies at [school/college] between [course start date and course end date].

We confirm that we give our consent to any national or international travel which our child needs to undertake between school and travelling home. We also re-consent to the reception and care arrangements which have been agreed with the school.

We confirm that we will continue to financially support [Student], and we give consent to [Student] using our funds throughout their studies in the UK.

Contact details for [Student]'s educational Nominated Guardian in the UK [populate automatically from information provided in Document 1]:

[Name of family friend (as on passport), close relative (as on passport) or agency]

[Address of family friend, close relative or agency]

[Email address]

[Phone number]

*Relationship of Nominated Guardian to us: [drop down: Agency, Family Friend, Close Relative] [If Close Relative, parents must choose from dropdown the following category of Close Relative: a grandparent, brother, sister, step-parent, uncle (brother or half-brother of a child's parent) or aunt (sister or half-sister of a child's parent) that is a British citizen or has settled status in the UK and is 25 years or older.]

We confirm that we consent to personal information regarding our child, [child's name] to be shared by [school/college] with the Nominated Guardian.



Yours	fai	thf	ully	,

Mother's Signature:

Name in full:

Date:

Address:

Father's Signature:

Name in full:

Date:

Address (if different to above):

Annexure 4

Proof of Address for Guardians that are Close Relative or Family Friend

Only one of the following options can be accepted:

- Utility Bill (energy, gas, electricity & water) not more than 3 months old
- Council Tax bill (dated same year as start of course)
- TV License (dated same year as start of course)
- Tenancy Agreement if bills & council tax cannot be provided. The Housing needs to be suitable private address, and not operated as a commercial enterprise, such as a hotel, youth hostel or House in Multiple Occupation (HMO)
- HRMC Letters are not more than 3 months old
- DO NOT ACCEPT DRIVERS LICENSE AS PROOF ADDRESS
- DO NOT ACCEPT BANK STATEMENTS AS PROOF ADDRESS
- DO NOT ACCEPT MOBILE PHONE BILLS AS PROOF ADDRESS