

UNDERAGE FORMS

Full name of student: _____

Date of Birth: ____/____/____ Country of Origin: _____

Medical Care and Treatment of Minor Children Consent

Hospitals and physicians may be reluctant to treat or care for children without consent from parents or legal guardians. This can cause problems if the child has a medical emergency and the parents/guardians are not readily available to consent to treatment.

PARENTAL CONSENT FORM – Medical

_____ as the parent/legal guardian of _____
Name of Parent/Legal Guardian *Name of Student*

I authorize and consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician, or hospital when, in the sole discretion of the attending physician, such care, treatment and procedures are immediately necessary or advisable in the interest of my child's health and well-being, and it's not advisable to take the time to contact me in advance. Under the circumstances set forth above, I elect not to be informed in advance of the nature and character of the proposed treatment, its anticipated results, possible alternatives, and the risks, complications and anticipated benefits involved in the proposed treatment and the alternative forms of the treatment, including non-treatment.

Signature of Parent/Guardian

Date

Housing

It is Tacoma Community College's recommendation that all students under the age of 18 live with a homestay family in order to ensure their safety and security while attending classes in the United States. Tacoma Community College strongly recommends that parents keep their children in a homestay where they can be monitored and cared for until they are 18 years old in the United States, and legally considered adults. In many cases living alone in an apartment or living with older friends may not be an appropriate environment for 16 and 17 year old students. If parents decide to allow their underage child to live anywhere other than with a homestay family, the parents must complete and submit a Parental Waiver Form.

PARENTAL WAIVER FORM - Housing

_____ as the parent/legal guardian of _____
Name of Parent/Legal Guardian *Name of Student*

I hereby grant permission for my child to arrange for housing in an apartment/home share etc. contrary to Tacoma Community College's policy that all underage students reside with a homestay. I fully understand the consequences of allowing my underage child to live unsupervised and release Tacoma Community College from any and all liabilities in regards to any harm that may come to my child as a result of my choosing to disregard their underage homestay recommendation. Tacoma Community College may also contact me at anytime with concerns they may have about my child in regards to academic or personal matters.

Signature of Parent/Guardian

Date

For more information:

Tacoma Community College
International Student Services and Programs
6501 South 19th Street, Building 11
Tacoma, Washington USA 98466
Phone 253-566-5190 / Fax: 253-566-6027
Email international@tacomacc.edu

Visit the TCC website at:
<http://www.tacomacc.edu>
and www.tacomacc.edu/internationalstudents

