



**Stamford American**  
SCHOOL HONG KONG

## DECLARATION AND UNDERTAKING FORM<sup>1</sup> (TO BE COMPLETED BY LOCAL GUARDIAN)

### Before completing this form:

The safety and well-being of all our students is our first priority. For this reason, the School must be kept aware of any arrangements affecting the care and well-being of its students.

It is important that you carefully read and understand this document. **By signing this form, you acknowledge that you have read and understood all the terms, declarations and undertakings contained in this form and agree to be bound by them.**

### Student's Details:

Name: \_\_\_\_\_

Preferred Name / Nickname: \_\_\_\_\_

Gender: M/F \_\_\_\_\_

Grade Level: \_\_\_\_\_

Stamford Student ID Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Passport Number: \_\_\_\_\_

Passport Expiration Date: \_\_\_\_\_

Hong Kong Visa Expiration Date: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Telephone (residence): \_\_\_\_\_

Telephone (mobile): \_\_\_\_\_



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SCHOOL HONG KONG

1. As the appointed local guardian of \_\_\_\_\_ (Student Name), a student at Stamford American School, I confirm and undertake the responsibility to:
  - (1) Be responsible for the Student's general welfare and well-being;
  - (2) Provide care and supervision for the Student, which includes providing safe and suitable accommodation for the Student during the School Year and for the Student's enrolment at the School;
  - (3) Be responsible for the daily care and control of the Student, including monitoring the Student's behaviour and discipline outside of school hours;
  - (4) Be readily contactable by the School at all times during the School Year and for the Student's enrolment at the School;
  - (5) Be readily available during the School Year to pick-up the Student from School within 2 hours of being contacted by the School whenever the need arises;
  - (6) Cooperate with the School to monitor the Student's progress, and:
    - ensure the Student attends classes regularly, unless prevented by illness or other reasonable excuse;
    - ensure as far as possible the Student abides by all the School's rules and regulations;
    - attend parent/teacher meetings/interviews/conferences as may be scheduled by the School from time to time;
  - (7) Inform the School immediately, and in any case, within seven (7) days should there be any change to my contact details or to the Student's details as set out below.
2. I hereby declare that I am duly authorised by the parents of the Student to make all decisions in relation to the Student, including but not limited to matters relating to the Student's education, health, welfare, safety, medical procedures and security and the School is entitled to act on such decisions, directions and instructions from me in all matters in relation to the Student.
3. I acknowledge that before the commencement of each School Year and throughout the year, I may be contacted by the School to confirm that I am authorised to continue acting as the local guardian of the student.

**I acknowledge that the School does not assume any responsibility for any personal injury or loss of personal belongings which may be suffered by the Student outside the school compound, outside of school hours or during activities which are not organised by the School.**

**I agree to compensate the School in full on demand for all losses and expenses incurred by the School in respect of any false declaration and/or breach by me of any term(s) or undertaking(s) in this form or arising from any decision(s) made by me in relation to the Student in respect of paragraphs 1 and 2 above.**



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I acknowledge that the School reserves the right to remove the Student from the School in accordance with the School's terms and conditions should it be found, in the School's professional judgment, that the Student is not adequately cared for or supervised, or if any of the terms, declarations or undertakings in this form are not complied with and such non-compliance remaining unresolved for a period thirty (30) days after the School gives written notice to the Parent(s) and/or the local guardian(s).

I declare that I have no past and present record of criminal convictions relating to crimes committed against women or children.

I accept and acknowledge the above terms. I confirm that the information as set out in this form is to the best of my knowledge, true and correct.

**Local Guardian Information:**

Name: \_\_\_\_\_

Nickname: \_\_\_\_\_

Gender: M/F \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Passport Number: \_\_\_\_\_

Passport Expiration Date: \_\_\_\_\_

Hong Kong Identity Card Number: \_\_\_\_\_

Hong Kong Visa Expiration Date: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Telephone (residence): \_\_\_\_\_

Telephone (work): \_\_\_\_\_

Telephone (mobile): \_\_\_\_\_

Email Address: \_\_\_\_\_

Language(s) Spoken: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_



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**I acknowledge that I have read and understand the responsibilities of guardian:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_