Zurich International School

Statement of Temporary Guardianship

The best learning environment for students is achieved when both home and school work in partnership with each other. Students may not enroll in ZIS unless one parent or an officially appointed guardian is in full time residence with the student at all times.

In accordance with the school policy, and in my/our temporary absence (24 hours or more), I/we the undersigned, parent(s) of

Student name | Grade

Date of birth (dd/mm/yy) | Citizenship

do hereby appoint, as ***temporary guardian(s)*** of my/our child, the person(s) whose particulars are indicated below, who will act for and on our behalf as parents, namely:

Name

Address

Telephone work | Telephone home | Telephone mobile

Email Address

Relationship to student

Date of absence - from dd/mm/yy to dd/mm/yy

Parents' out of town contact information:

Telephone number | Email address | Fax number

Zurich International School
Admissions Office · Steinacherstrasse 140 · CH-8820 Wädenswil · T +41 58 750 25 00 · F +41 58 750 25 01 · info@zis.ch · www.zis.ch
Campuses in Wädenswil (Main Office), Adliswil, Baden, Kilchberg

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I/we understand that, as far as the school is concerned, guardianship in this case includes, among others, the following specific responsibilities:

— direct care and supervision of the child on matters pertaining to his/her education at Zurich International School
— authorization to make decisions, on behalf of the parents, in the event of a medical emergency

I/we have made the following residence arrangements for my/our child

— my/our child will reside with our temporary guardian
— our temporary guardian will reside in our home with my/our child

I/we further understand that it is my/our responsibility to:

— inform the school office each time my/our absence from my/our child is more than 24 hours
— Update the school office and Admissions Office if any contact information for myself/ourselves or my/our appointed temporary guardianship changes.

Date

Parent signature | Printed name

Parent signature | Printed name

Please send the completed form to the administrative assistant at your child's campus.

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