**To be completed by the Parent / Guardian**

I confirm that, in my opinion, my child is fit and the job applied for will not jeopardise their health, welfare and ability to take full advantage of their education.

|  |  |  |
| --- | --- | --- |
| Child’s Name: | | |
| Parent/Guardian Printed Name: | | Dated: |
| Signature: | | |
| Email: | Telephone: | |
| Address if different from your child: | | |