

DECLARATION AND UNDERTAKING FORM¹ (TO BE COMPLETED BY PARENTS APPOINTING A LOCAL GUARDIAN)

声明和保证书

(须由家长指定的本地的监护人填写完成)

Before completing this form: 填写此表格前 :

It is important that you read carefully and understand the terms, declarations and undertakings contained in this form. **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 the same.** 重要的是, 您需要先仔细阅读并理解本表格中包含的条款, 声明和保证。 **透过签署本表格, 就代表您确认您已阅读并理解本表格中包含的所有条款, 声明和保证, 并同意接受这些约束。**

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. 所有学生的安全和福利是我们的首要任务。 因此, 学校必须了解并被告知任何影响其学生的护理和福利的安排。

Please note that the local guardian(s) appointed by you must be a responsible adult who is presently residing in Singapore. 请注意, 您指定的本地监护人必须是目前居住在新加坡的能负责任的成年人。

Student's Details: 学生细节

Name 姓名 M/F 男/女

Date of birth 出生日期

Nationality 国籍

Passport Number 护照号码

Date of Expiry 护照到期日期

Residential Address 住宅地址

Telephone (residence) 电话 (住所)

Telephone (mobile) 电话 (手机)

¹ To be submitted with Form C 请与 C 表格一同递交

Student Visa Number 学生签证号码

Student Visa Expiry 学生签证到期日期

Year Group 年级组

Passport Number 护照号码

Date of Expiry 护照到期日期

Residential Address 住宅地址

Telephone (residence) 电话 (住所)

Telephone (mobile) 电话 (手机)

Local Guardian 1: 本地监护人:

Name 姓名 M/F 男/女

Date of birth 出生日期

Passport Number 护照号码

Date of Expiry 护照到期日期

Residential Address 住宅地址

Telephone (office) 电话 (办公室)

Telephone (residence) 电话 (住所)

Telephone (mobile) 电话 (手机)

Email 电子邮件

Languages spoken 语言

Relationship with the Student 与学生的关系

Local Guardian 2: 本地监护人 2 (如果适用):

Name 姓名 M/F 男/女

Date of birth 出生日期

Passport Number 护照号码

Date of Expiry 护照到期日期

Residential Address 住宅地址

Telephone (office) 电话 (办公室)

Telephone (residence) 电话 (住所)

Telephone (mobile) 电话 (手机)

Email 电子邮件

Languages spoken 语言

Relationship with the Student 与学生的关系

1. As the Parent of _____ (name), a student (“**Student**”) at Stamford American International School (“**School**”), I hereby appoint the following person(s) as the local guardian(s) who shall have the authority to make such 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 hereby requested and authorised to act on such decisions, directions and instructions of the local guardian(s) in all matters in relation to the Student. I confirm that the School may, but shall not be obliged to contact or communicate with me in respect of such decisions, directions and instructions of the local guardian(s). 作为史丹福美国国际学校 (“学校”) 的学生 (姓名)

_____ 的 (“学生 ”) 的父母，我特此任命下列人士为授权的学生本地监护人，将可以为学生做所有决定，决定是包括但不只限于与学生的教育，健康，福利，安全，医疗程序和安全相关的事项，对于这些事项学校在此被要求并且被授权，但凡与学生有关的所有事项决定与指示，请按照本地监护人指示采取行动。对于本地监护人的这些决定与指示，我确认学校可以不必也没有义务与我联系或沟通。

2. I confirm that the School may communicate with the local guardian(s) on all such matters relating to the Student, including the Student's performance, conduct and other matters. I acknowledge that such communication between the School and the local guardian(s) shall be deemed to be communication between the School and me, and shall bind me accordingly. 我确认学校在与学生有关的所有相关事宜，包括学生的表现，行为和其他事项

上，可以与本地监护人沟通。我认可，学校与本地监护人之间的这种沟通应被视为学校与我之间的沟通，并据此对我有约束力。

3. I acknowledge that before the commencement of each School Year, I may be contacted by the School to confirm whether the local guardian(s) of the Student appointed by me (as per the School's records) is authorised to continue acting as the local guardian(s) of the Student. 我认可在每个学年开始之前，学校可以与我联系，并且确认我所指定的学生（根据学校的记录）的本地监护人是否有权继续担任的学生的本地监护人。
4. I acknowledge that there will only be a maximum of two access for the Student's MyStamford account ID given to parents/guardians. I authorise the following Parent/Guardian (please state email address). 我认可给父母/监护人的学生 MyStamford 帐户 ID 最多只能有两个权限。我授权以下父母/监护人（请注明电子邮件地址）。
- (i.) _____
- (ii.) _____
5. I also hereby undertake to: 我在此保证：
- (1) Inform the School immediately, and in any case, within seven (7) days should there be any change to my contact details as set out below; and ; 并且 · 我的联系方式，在任何情况下如有任何更改，按照下述方式，我将立即在七（7）天内通知学校
- (2) Execute a new declaration and undertaking form in the form and manner prepared by the School if a replacement local guardian is required. I understand that the School also requires me to personally execute the said form, together with the replacement local guardian (who shall be a responsible adult), in the presence of a representative appointed by the School, failing which the School has the right to refuse to admit the Student for the School Year / remove the Student from the School in accordance with the School's terms and conditions. 如果需要替换本地监护人，请学校准备新的声明和保证书的形式和方式执行。我明白，学校还要求我在由学校委派的代表在场的情况下，与替换的本地监护人（此人是一名负责任的成年人）一起亲自填写该表格，否则学校根据学校的条款和条件有权拒绝该学年学生入学许可，或让学生从学校退学。

I declare that it is my personal decision to appoint the person(s) listed above as the local guardian(s) of the Student and that I have had the opportunity to conduct adequate checks to satisfy myself as to the suitability of the above said person(s) to act as the local guardian(s) of the Student. I acknowledge that the School takes no responsibility over my arrangement with the local guardian(s).

我声明 · 我个人决定任命上述人员为学生的本地监护人 · 并且我有机会对此人进行充分核查 · 以确保上述（众）人员作为学生的本地监护人的适当性 · 我承认学校对我与本地监护人的安排不承担任何责任。

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.

我认可学校不对学生在学校校园外 · 学校上课时间以外或学校没有组织的活动期间可能遭受的任何人身伤害或个人财物损失承担任何责任。

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 or breach by me of any term(s), or undertaking(s) in this form or arising from any decision(s) made by the above said appointed local guardian(s) in relation to the Student as set out in paragraphs 1 and 2 above.

我同意按要求全额赔偿学校所有损失和费用，如果由于我违反任何条款作出任何虚假声明，或是违反本表格的保证，或者关于上述第 1 及第 2 段所指定的学生本地监护人作出任何决定，因此引起的所有损失和费用。

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 uncured for a period thirty (30) days after the School gives written notice to the Parent(s) and/or the local guardian(s).

我认可学校根据学校的条款和条件保有开除学生的权利，取决于学校的专业判断中发现学生没有得到充分照顾或监督，或者任何条款，声明或保证未能合规遵守，并且在学校向家长和/或当地监护人发出书面通知后的三十（30）天内，这种不遵守情况仍未解决。

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.

我接受并认可上述条款。我确认，本表格中列出的信息是据我所知皆属真实和正确的信息。

Parent 1 第一位家长

Signature 签名

Name 姓名 M/F 男/女

Date of birth 出生日期

Nationality 国籍

Passport Number 护照号码

Date of Expiry 护照到期日期

Residential Address 住宅地址

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Parent 2 第二位家长

Signature 签名

Name 姓名 M/F 男/女

Date of birth 出生日期

Nationality 国籍

Passport Number 护照号码

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