



Parental Agreement Form

Personal information of participating student

Full name of student _____

Date and place of birth / nationality _____

Any related medical condition _____

Level of English language _____

Desired programme of study at university _____

Contact information and parental consent of parent / legal guardian

Your son / daughter has agreed to take part in the Yaşar University Familiarisation Programme in Turkey on 16 July- 21 July 2018. By signing the below, you give your consent to let your child participate in this programme and the related activities. Full contact details will be sent shortly.

Full name _____

Address _____

Phone number - Home _____ Mobile _____

Email address _____

Signature _____ Date _____

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