



Parent/Guardian Authorization for Minors Form

For applicants younger than 18 years of age (at the start of classes) this form must be submitted in order for the student to be admitted:

I, _____, am the parent or legal guardian of the minor, _____,
(Parent/guardian's name) (Student's name)

who is applying for admission as an international student at Contra Costa College/Diablo Valley College/Los Medanos College. I understand and agree that as the parent/legal guardian of the minor, I am and remain financially responsible for the mandatory health insurance required for all international students. I will promptly pay any invoice for the cost of such care (not covered by the insurance). I also grant permission for any necessary medical treatment of the minor while attending Contra Costa College/Diablo Valley College/Los Medanos College.

I understand that Contra Costa College/Diablo Valley College/Los Medanos College requires that minor students live under the supervision of a host family for at least two months. Students may also show that they are living with family or friends of family in the area. I understand that the college and district have no legal responsibility for the care or well-being of the minor student wherever he or she chooses to live while in the U.S. attending Contra Costa College/Diablo Valley College/Los Medanos College. I also understand that the college and district have no relationship with any homestay company and assumes no responsibility for the action of any host family or homestay company. I understand that in all legal issues, I am and remain responsible for the care and guardianship of this minor student.

Contra Costa College/Diablo Valley College/Los Medanos College requires that you certify your authorization by submitting an electronic signature. To certify your application, provide an electronic signature (type your name) below.

Student Signature

mm/dd/yyyy