



Christian Unified Schools International Office Designated Guardian in the United States OR Deposit (Choose only 1 OR 2)

All International Students must have a Designated Guardian or place a deposit with the school.
(The designated guardian is usually NOT the American host family)

Option 1: For a Designated Guardian in the United States (*appointed by student's parents in home country*)

REQUIREMENTS:

1. **Must be at least 25 years old**
2. **Must speak English**
3. **Must be acquainted with American customs and educational systems**
4. **Must live in the continental United States and be able to take physical responsibility for the student within twelve (12) hours of notification of a problem, if parents are not in residence**
5. **Must speak the student's and parents' first language**
6. **Must be well-known by the parents or the contracted sending agency**

RESPONSIBILITY: Must maintain communications between parents, school, and host family concerning student.

1. **Help counsel and decide academic, living, medical and/or behavior questions, deficiencies, or problems**
2. **Assume responsibility of student within 12 hours if student is dismissed from Christian Unified Schools or any home stay (if participating) program, if parents are not in USA residence**
3. **Sign for a minor or an 18-year-old student who is given permission by the parents in the home country to take the driving test and/or drive any motorized vehicle**
4. **Assume physical custody if student drives...meaning student MUST live with the designated guardian.**
5. **Must keep in contact with the CUSSD international office - including the following:**

Approve major schedule changes,
Approve any home stay changes and follow all notification procedures,
Keep informed by email, website and RenWeb of student's progress and school activities,
Immediately notify school of all changes in contact information (student, parent, guardian, etc.)

A. Parents appoint DESIGNATED UNITED STATES GUARDIAN for student _____

(Student's Name)

Guardian Name _____ Relation _____

(Appointed USA Guardian's Name and information)

Address _____ Phone _____

City/State/Zip _____ Cell Phone _____

Email _____ FAX _____



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B. Guardian and Parents read and sign:

- I have read the above requirements and responsibilities of the Designated Guardian for International Students of Christian Unified Schools of San Diego and home stay (if participating).
I accept responsibility for _____ as
(Student's Name)
appointed by his/her parents _____ .
(Student's Parents' Name)
- I understand that if the student is dismissed from school or the home stay, I will be notified and will assume physical custody of the student within twelve hours of notification.
- I understand that if the parents allow the student to drive a motorized vehicle, I will assume all responsibility, residency of student, and show proof of insurance for the student driver.
- I understand it is my responsibility to keep informed of student's progress, course selections, and school events.
- I understand it is my responsibility to keep informed and notify school of all contact information changes.

(Signature of Guardian)

(Print Guardian Name)

(Date)

(Signature of Parent of Student)

(Print Parent of Student Name)

(Date)



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Option 2: If NO United States Designated Guardian can be appointed, parent must do two things:

1. Establish and maintain current contact information with international office: home, email, phone, fax;
2. Meet two (2) financial requirements:

A. RETURN AIRFARE / DEBT Refundable DEPOSIT of \$1000.00 US

- I understand that **since there is no Designated Guardian in the United States** who will accept responsibility as outlined above (in option 1) for my child, I must deposit \$1000.00 with CUSSD to be used for any outstanding expenses and/or debts incurred by my child as well as return airfare in the event that my child is dismissed from school, cannot be accepted by a new home stay or will not be placed by a home stay agency.
- I understand that after notification of dismissal, my child will be placed on an airplane by a home stay and/or school official to the International Airport in my country. All school responsibility for my child will end at that time. All debts and expenses incurred by my child will be deducted from any remaining funds.
- I understand that the unused funds on deposit will be mailed by check (after financial clearance is given) to the name and address I provide in writing.

Parent Signature _____ Date _____

B. ADDITIONAL Yearly, Non-Refundable SCHOOL LIAISON FEE of \$1000.00

- I understand that my child will be assigned a Liaison to help with the following:
 - Check academic progress of student by email, website, and RenWeb
 - Act as a contact between student, school, and parent by attempting to do the following:
 - discuss and seek parental approval for any student attempts to change home stay
 - discuss and seek parental approval for any student attempts to change classes
 - discuss and seek to inform parents of any behavior, attendance, or academic issues
 - Keep student informed of pertinent school activities and requirements
- I understand that the parent is responsible (not the child) for housing or major educational decisions.
- I understand that my child may not travel during the school year without specific, approved, and written authorization which meets CUSSD's guidelines.
- I understand that my child may not drive any motorized vehicle at any time.
- I understand that I must maintain and keep in contact with CUSSD and the liaison through email.
- I understand that I must be immediately available through phone, email, and fax.
- I understand that the liaison fee is non-refundable if my child leaves school for any reason.
- I understand that it is impossible for the liaison to know everything about my child at all times.
- I understand that the liaison is an aid to my child's success and not a guarantee of success.
- I understand that it is ultimately my responsibility as the parent to make wise decisions for my child.
The liaison is not responsible for decisions nor my lack of or delay in decision making.



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I hereby agree that I shall defend, indemnify and hold harmless Christian Unified Schools of San Diego and its representatives from any and all liability and costs for injury to persons and/or property directly or indirectly arising out of my actions while I am a student at Christian Jr/Sr High.

Signatures: (Student's) _____ Date _____

(Mother's Signature) (Father's Signature) Date _____

Print Carefully: Parents' Names _____

Student's Name _____ **Parent's current email** _____