

COMPACT APPLICATION FORM 2010/11

SECTION 2: STATEMENT OF CONSENT - To be completed by your parent, carer or legal guardian.

Name of Student (please print)

UB Number: (please see confirmation email)

Publicity Consent

Do you consent to your child participating in any media recording (photographs, interviews that will be used solely for promotion and evaluation)? (Please tick)

Yes No

Declaration

I have read the information on the form alongside any additional details that my son/ daughter has been provided. I understand that the scheme will enable my son/ daughter to book to attend events such as taster days at the University and to come independently to use the University library. If appropriate they will also receive an invitation to attend the Compact Summer School. It is important to understand and acknowledge that the University of Bradford engages differently with its student body; we are not a school. Whilst with us, your son/daughter or ward will not be supervised directly by a member of staff other than during the taught sessions. Full information about the scheme is provided on: www.bradford.ac.uk/compact

I agree that (name of student)

may participate in the Compact Scheme.

Signed: _____

Please return this completed form to the Education Liaison Office, University of Bradford, Richmond Road, BD7 1DP.