Letter of Consent

To: The Director of Immigration

I, ______________________, am the father/mother* of ______________________
(name of father/mother) (name of student)

("the Student") from ______________________. I hereby consent to let the
(city/province/country)

Student study in the City University of Hong Kong and authorise ______________________,
(name of guardian/university)

(a relative/friend/university in Hong Kong*), to act as guardian during the Student's stay in

Hong Kong before he/she* attains the age of 18.

I further understand and acknowledge the fact that by agreeing to so act as guardian:-

- the party shall not be deemed to have assumed any parental responsibilities of the Student;

- the party serves only as a contact person/entity in Hong Kong, for the benefit of the
  Student's parents and the Immigration authorities, when it becomes necessary or in case of
  emergency;

- the party's responsibility shall be limited to that of a sponsor, as required by the
  Immigration Department upon an entry visa application, namely (i) to be responsible for
  the Student's repatriation to his/her country of origin if at the expiration of stay granted by
  the Director of Immigration, the Student still fails to leave Hong Kong, and (ii) to seek
  approval from the Director of Immigration prior to the Student's transfer to any
  educational institution/course of study in Hong Kong and inform him the cessation in the
  Student's education here; and

- any incidental expenses incurred by the party in assuming the responsibility of the Student
  in complying with any statutory requirements including but not limited to those imposed
  by the Immigration Department as conditions for the Student's stay in Hong Kong will be
  borne by me and I will reimburse payment of all such expenses within 14 days of
  receiving the request.

__________________________________________________________
Signature of the Student's Father/Mother
Date: ______________________

__________________________________________________________
Signature of Guardian/
Authorised person for and on behalf
of the University
Date: ______________________

* delete where inappropriate