Institute of English Language Studies (IELS)
Groups with Accommodation & without Activities with IELS

Group Leader Responsibility:

IELS is not responsible for the group with minors, _____ when they are away from school premises or while engaged in activities not organised with IELS.

In the event that their parents or guardians give them permission to leave their IELS accommodation, their International Group Leader will have full responsibility for them.

Likewise, the International Group Leader is responsible for following IELS rules and policies and all students must be in their accommodation not later than **21:00**.

I, _____Passport/IDnumber: _____

take full legal responsibility and care as the International Group Leader for the following students:

1._____ Passport/ID number:_____

2._____ Passport/ID number: _____

3._____ Passport/ID number: _____

4._____ Passport/ID number: _____

5._____ Passport/ID number: _____

6._____ Passport/ID number: _____

7._____ Passport/ID number: _____

8._____ Passport/ID number: _____

9._____ Passport/ID number: _____

10._____ Passport/ID number: _____

11._____ Passport/ID number: _____

12._____ Passport/ID number: _____

13._____ Passport/ID number: _____

14._____ Passport/ID number: _____

15._____ Passport/ID number: _____

16._____ Passport/ID number: _____

17._____ Passport/ID number: _____

18._____ Passport/ID number: _____

19._____ Passport/ID number: _____

20._____ Passport/ID number: _____

21._____ Passport/ID number: _____

22._____ Passport/ID number: _____

23._____ Passport/ID number: _____

24._____ Passport/ID number: _____

25._____ Passport/ID number: _____

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On the following dates DD / MM / YY - DD / MM / YY

Please indicate what your plan is for the next few days, with this information IELS is committed to informing Host Families accordingly to ensure the safety and experience of the student.

Monday DD/MM/AA : _____

Tuesday DD/MM/AA : _____

Wednesday DD/MM/AA :_____

Thuesday DD/MM/AA : _____

Friday DD/MM/AA : _____

Saturday DD/MM/AA : _____

Sunday DD/MM/AA : _____

Monday DD/MM/AA : _____

Tuesday DD/MM/AA : _____

Wednesday DD/MM/AA : _____

Thuesday DD/MM/AA : _____

Friday DD/MM/AA : _____

Saturday DD/MM/AA : _____

Sunday DD/MM/AA : _____

I confirm that the parents or guardians of the minors have been informed the above.

I understand that by signing this form, IELS takes no liability or responsibility, outside the school premises, for the safety of the above-named students during this time period.

This form is to be submitted to IELS Malta, together with a photocopy of the International Group Leader's passport and telephone number to authorise families to call him/her if necessary.

Institute of English Language Studies (IELS)
Groups with Accommodation & without Activities with IELS

Name International Group Leader's **Signature & Mobile Phone**:

Welfare Coordinator
Tel: +356 2132 0381 / Mob: +356 9933 0001
Email: info@ielsmalta.com