## **Consent Letter**

We are	and
(Father's name)	(Mother's name)
The father and mother of	
	(Student's full name)
Date of Birth	Passport Number
We give a permission to the above-m	entioned student to study at
	in New Zealand
(School's name)	(City)
Between	To
(Start date)	(Finish date)
•	costs including tuition fee, accommodation son/daughter studies in New Zealand.
(father's signature)	(mother's signature)
()	()
Date / /	Date / /