LEGAL GUARDIAN - SAMPLE LETTER

Date

Saddleback College
International Student Office
28000 Marguerite Parkway
Mission Viejo, CA 92692

Re: (Student Name)

I, _____ will be the legal guardian of _____
Guardian Name Student Name

while he/she attends Saddleback College.

This student will be living with me and will be placed under my care until he/she reaches the legal adult age of 18 in the United States.

I will take full legal responsibility for this student. In addition, I authorize the Saddleback College Health Center to administer the required tuberculosis exam and if needed, an x-ray examination.

I reside at the following address:

_____
Street Address

_____
City State Zip code

_____
Phone Email Address

Sincerely,

(Signature)

Printed Name

(This letter must be notarized by a notary public and a copy of guardian's driver license must also be attached).

SAMPLE