

**Georgia  
Tech**

**Language  
Institute**

*Intensive English for International Students, Business,  
and Professional People*

**Georgia Tech Language  
Institute  
GUARDIANSHIP  
AUTHORIZATION**

Language Institute • Georgia Institute of Technology • Atlanta, GA 30332-0374, USA

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(PLEASE PRINT)

I, \_\_\_\_\_, authorize \_\_\_\_\_ to serve as  
(parent) (guardian)

guardian for my son/daughter, \_\_\_\_\_, as long as he/she is under the  
(student)

age of 18 and a student at the Language Institute, Georgia Institute of Technology.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

e-mail \_\_\_\_\_

**ACCEPTANCE OF GUARDIANSHIP**

I, \_\_\_\_\_, accept the responsibility of guardianship for  
(guardian)

\_\_\_\_\_ as long as he/she is under the age of 18 and a  
(student)

student at the Language Institute, Georgia Institute of Technology.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address (in Atlanta) \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

e-mail \_\_\_\_\_