

Delegation of custody of a minor For students under the age of 18 and their parents

Enrolment of a minor

- If you are under 18 you are considered as a minor in Hungary.
- As a minor you can be enrolled if, and only if your parent(s), approve it.
- It means you have two options:
 - a) One of your parents comes with you to the enrolment: Either of your parents can come with you to the enrolment and signs all the necessary forms on your behalf.
 - b) The parent delegates (authorizes) someone with your custody for the enrolment: If your parent cannot attend the enrolment, your parents can authorize a third person they trust who is above the age of 18 and can be present at your enrolment and sign the forms on your (and your parents') behalf. The latter situation will be discussed on the following slide.





About the Delegation of Custody

- In case your parents opt for authorizing someone the authorized person has to be over the age of 18 and has to bring his/her ID and/or passport with him/her along with the <u>Delegation of</u> <u>custody form.</u>
- You can see a sample of how to fill out the form <u>HERE</u>.

Upon enrolment, you need to submit:

- a copy of the parent's passport ID,
- A copy of the representative's passport/ID,
- The correctly filled out Delegation of custody form

Please check and have the form signed before you leave your homecountry, or ask your parents to send it to your via e-mail.

Without these documents, you cannot enrol if you are under 18!

Delegation of Custody rights

The undersigned (Name)

Name at birth: FULL NAME OF THE PARENT

Date and place of birth: DATE AND PLACE OF BIRTH OF THE PARENT

Mother's name: MOTHER'S NAME OF YOUR PARENT (YOUR GRANDMOTHER)

Identity card or Passport No.: PASSPORT OR ID NUMBER OF THE PARENT

 hereby declare that I am the parent/guardian of {Name of the student} (hereinafter Student) who will be studying in Hungary, at Eötvös Loránd University (established in Egyeten Ter 1-3, Budapest 1053, Hungary)

As the Student is still <u>under age</u> of majority, I hereby grant full power and authority to {Name of representative}

(Name at birth: NAME OF THE REPRESENTATIVE (AUTHORIZED PERSON)

Date and place of birth: DATE AND PLACE OF BIRTH OF THE REPRESENTATIVE

Mother's name: NAME OF THE OF THE REPRESENTATIVE'S MOTHER

Identity card or Passport No.: ID OR PASSPORT NUMBER OF THE REPRESENTATIVE

to represent me in the matters relating to the <u>Student's</u> permanent residence and studies in Hungary.

- 2. These matters are the following:
- 3. This Delegation of Custody Rights is effective for a period beginning __and ending...
- 4.I reserve the right to revoke this authority at any time.

Name: NAME OF THE PARENT

Signature: SIGNATURE OF THE PARENT

Date and location: DATE AND LOCATION WHEN AND WHERE THE FORM WAS SIGNED

