PERRY BOARD OF EDUCATION

FD-E3

POWER OF ATTORNEY

(Full name of minor child)	(Date of birth)
(Full name of minor child)	(Date of birth)
(Full name of minor child)	(Date of birth)
"I designate(Full r	ame of Attorney-in-fact)
(Street address	city, state and zip code of Attorney-in-fact)
(Street address)	erty, state and 21p code of Attorney-III-1act)
(Home phone of Attorney-in-fact) as the attorney-in-fact of each minor child	(Work phone of Attorney-in-fact)
,	named above.
"I delegate to the attorney-in-fact property of each minor child named above inspect and obtain copies of education recactivities and other functions concerning to respect to school activities, medical and deconcern the child. This delegation shall no	all of my power and authority regarding the care, custody and including but not limited to the right to enroll the child in school, ords and other records concerning the child, the right to attend school echild, and the right to give or withhold any consent or waiver with intal treatment, and any other activity, function or treatment that may include the power or authority to consent to marriage or adoption of an abortion on or for the child, or the termination of parental right
"I delegate to the attorney-in-fact property of each minor child named above inspect and obtain copies of education recactivities and other functions concerning to respect to school activities, medical and deconcern the child. This delegation shall not the child, the performance or inducement to the child."	all of my power and authority regarding the care, custody and including but not limited to the right to enroll the child in school, ords and other records concerning the child, the right to attend school the child, and the right to give or withhold any consent or waiver with treatment, and any other activity, function or treatment that may include the power or authority to consent to marriage or adoption

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POWER OF ATTORNEY (Cont.)

5.	"This power of attorney is effective for a period not to exceed one year, beginning
	By:(Parent/Legal Custodian signature)
	(Parent/Legal Custodian signature)
6.	"I hereby accept my designation as attorney-in-fact for
	(Minor child(ren)) as specified in this power of attorney."
	(Attorney-in-fact signature)
Stat	e of
Coı	unty of
	KNOWLEDGEMENT
AC	
Bef	ore me, the undersigned, a Notary Public, in and for said County and State on this day of
Bef	ore me, the undersigned, a Notary Public, in and for said County and State on this day of
Bef and	ore me, the undersigned, a Notary Public, in and for said County and State on this day of (Name of Parent/Legal Custodian (Name of Attorney-in-fact), to me known to be the identical persons who
Bef and exe	ore me, the undersigned, a Notary Public, in and for said County and State on this day of
Bef and exe dee	ore me, the undersigned, a Notary Public, in and for said County and State on this day of (Name of Parent/Legal Custodian (Name of Attorney-in-fact), to me known to be the identical persons who cuted this instrument and acknowledged to me that each executed the same as his or her free and voluntary act a d for the uses and purposes set forth in the instrument.
Bef and exe dee	ore me, the undersigned, a Notary Public, in and for said County and State on this day of (Name of Parent/Legal Custodian (Name of Attorney-in-fact), to me known to be the identical persons who cuted this instrument and acknowledged to me that each executed the same as his or her free and voluntary act a
Bef and exe dee Wit	ore me, the undersigned, a Notary Public, in and for said County and State on this day of (Name of Parent/Legal Custodian (Name of Attorney-in-fact), to me known to be the identical persons who cuted this instrument and acknowledged to me that each executed the same as his or her free and voluntary act a d for the uses and purposes set forth in the instrument.
Bef and exe dee Wit	ore me, the undersigned, a Notary Public, in and for said County and State on this
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Bef and exe dee	ore me, the undersigned, a Notary Public, in and for said County and State on this
Befandandexe dee	ore me, the undersigned, a Notary Public, in and for said County and State on this
Bef and exe dee Wit	ore me, the undersigned, a Notary Public, in and for said County and State on this
Bef and exe dee Witt (Sig	ore me, the undersigned, a Notary Public, in and for said County and State on this
Bef and exe dee Witt (Sig	ore me, the undersigned, a Notary Public, in and for said County and State on this
Bef and exe dee Wit (Sig (Sea	ore me, the undersigned, a Notary Public, in and for said County and State on this

Adoption Date: August 4, 2014

Revision Date(s):

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