



**POWER OF ATTORNEY**

**Program:** \_\_\_\_\_ **During:** Fall \_\_\_\_ Spring \_\_\_\_ Summer \_\_\_\_  
(SPRING/FALL Semester or Academic Year Program) (Indicate Year)

I, \_\_\_\_\_ ID# @ \_\_\_\_\_  
(Student's Name)

hereby authorize \_\_\_\_\_ to endorse and accept any check  
(Authorized Person's Name)

payable in my name, or to act on my behalf in any school-related matters while I am studying abroad.

Valid Until: End of Study Abroad Program Stated Above

**Authorized Person's Information:**

\_\_\_\_\_  
Street Address Apt#  
\_\_\_\_\_  
City State Zip Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Authorized Person's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Relationship to Student:** \_\_\_\_\_

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(To be signed in front of a notary public)

**NOTARY AUTHORIZATION:**

**VENUE:** State of: \_\_\_\_\_ County of: \_\_\_\_\_

**JURAT:**

*Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_*

**By:** \_\_\_\_\_

**Notary's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Official Seal or Stamp)