

POWER OF ATTORNEY

POA/01

TO CENTRAL APPLICATIONS OFFICE

The Central Applications Office is committed to protecting your privacy and to ensure that your personal information is collected and used properly, lawfully, and transparently.

I, the undersigned _____ with CAO Number _____,
Applicant's full name and Surname

As an **Applicant** to Central Applications Office for placement consideration at an Institution for Post-School Education, I hereby nominate the following person:

_____ with identity number _____, Relationship _____,
Nominee's full name and Surname

to have full power and authority to act for me in all matters relating to my Application to CAO, which may include, but not limited to:

- (1) Communicate telephonically or otherwise with CAO on any matter relating to my application to CAO;
- (2) Receive personal information from CAO, written or orally, on my behalf and relating to the said application.

Select ONE of the following and sign:

A. ☐ Applicant under the age of 18 – Parent / Guardian

I warrant that I am the Applicant's Parent or Legal Guardian, that the Applicant is under the age of 18 years, and that I have the legal authority to execute this Power of Attorney on the Applicant's behalf.

THIS DONE AND EXECUTED AT _____, ON THIS THE _____ DAY OF _____ 20____.

Parent or Legal Guardian Signature

B. ☐ Applicant aged 18 or older

I warrant that I am 18 years or older, and that I have full legal capacity to execute this Power of Attorney.

THIS DONE AND EXECUTED AT _____, ON THIS THE _____ DAY OF _____ 20____.

Applicant Signature

Witness 1: _____

Witness 2: _____

Nominee's Signature

Witness 1: _____

Witness 2: _____