

GENERAL POWER OF ATTORNEY / LETTER OF GUARDIANSHIP

Carrollton Christian Academy requires that a letter of guardianship be provided for all International students living with a host family or relative other than parents. We strongly suggest that a legal document prepared by a lawyer be drawn up by the parents. For those families who have not formally obtained legal counsel, the following form may be used at parents' discretion. **By providing this form to the parents, this is no way holds Carrollton Christian Academy legally liable in any way for this student and/or guardian named below.**

TO BE FULLY COMPLETED BY PARENTS – SIGNATURES ARE TO BE NOTARIZED

Student's full name: _____ Birthdate: (Mo) _____ (Day) _____ (Year) _____

Father's full name: _____ Mother's full name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Postal code: _____

Country: _____ Phone: _____ Email: _____

Our child (student named above) has our permission to reside with the following:

Full name of guardian(s): Mr. / Mrs. / Ms. _____ Mr. / Mrs. / Ms. _____

who lives at (full address) _____

This guardian is/is not a blood relative of this student: Yes No If yes, please state relation to student: _____

As the parents of the above-named **student**, we hereby appoint above-named **guardian** to be the true and lawful **guardian** for the above-named **student**. The above-named **guardian** so appointed may do and perform any act that we as the parents might perform or do if we were personally present. The **guardian**, by accepting or acting under this appointment, assumes all fiduciary and legal responsibilities of an agent.

In addition to the general Power of Attorney granted to the above-named **guardian**, it is specifically agreed and understood that above-named **guardian** shall have the authority to the following on behalf of the above-named **student**:

1. To take, hold, possess, invest, lease, or otherwise manage any and all real, personal, or mixed property that we deliver to above-named **guardian** on behalf of the above-named **student**.
2. To make, do, and transact every kind of business necessary for above-named **student** to receive an education at Carrollton Christian Academy.
3. To conserve, invest, disperse, or use any money that we give to above-named **guardian** on behalf on above-named **student** for the purposes intended.
4. To make deposits or investments in or withdrawals from any account, holding, or interest that is necessary for above-named **guardian** to adequately take care of above-named **student** while he/she is at Carrollton Christian Academy.
5. To make all medical decisions necessary for the care of the above-named **student** while enrolled at Carrollton Christian Academy.
6. To set up any bank accounts that above-named **guardian** deems necessary to take care of above-named **student** while he/she is at Carrollton Christian Academy.
7. To do any act necessary to properly insure the health and education of above-named **student** while he/she is living with above-named **guardian**.
8. To be responsible for above-named **student** in all aspects of school life at Carrollton Christian Academy, including, but not limited to: day-to-day school decisions and activities, signing of all pertinent forms, being contacted by school officials with any questions or concerns, and providing all transportation to and from school in a timely manner.

If above-named **guardian** dies, becomes legally disabled, resigns, or refuses to act, then this Power of Attorney will, in all respects, terminate.

This Power of Attorney shall be effective as of today's date and shall remain in full and effect until terminated by us in writing. We agree that any third party who receives a copy of this document may act under it.

Signed this _____ day of _____, 20 _____.

FATHER (printed name): _____

MOTHER (printed name): _____

Signature: _____

Signature: _____

This document was acknowledged before me on the above date.

Notary public in and for the state/country of: _____

Printed name: _____

Signed name: _____

Notary Seal