

Power of Attorney

STATE OF TEXAS

COUNTY OF _____

KNOW ALL BY THESE PRESENTS:

That I, _____ (parent) of _____ (street address) _____ (city, state, zip) do hereby Appoint _____ (name of attorney in-fact) as my true and lawful attorney in-fact for me and in my name, place, and stead to take any and all actions and exercise any and all powers that I could take or exercise for the purpose of my child (student) in attendance in the El Paso Independent School District as set forth below.

The following acts and powers are granted by the Power of Attorney:

1. **To make decisions concerning my child's education, including special education decisions related to the provision of a free appropriate public education under the Individuals with Disabilities Education Act.**
2. To receive and discuss the student's class work with appropriate District employees.
3. To examine and receive copies of the student's _____ School District records and report cards.
4. To give permission for the student's participation in various activities such as, but not limited to, field trips, and other student travel.
5. To be notified and consulted concerning the student's attendance and tardiness.
6. To give permission for any disciplinary actions involving the student by District employees,
7. To perform any other duties, responsibilities and privileges normally afforded to the parents of students in the District.

I hereby ratify and confirm whatever such attorney-in fact shall and may do on behalf of the student by virtue of this Power of Attorney. This Power of Attorney may be voluntarily revoked in writing. A copy of any written revocation will be delivered to the El Paso Independent School District within five calendar days of revocation. I declare that all powers given to any attorney-in fact shall be exercisable by my attorney-in fact only for the _____ academic year, unless sooner revoked in writing.

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____, _____

Parent

STATE OF TEXAS

COUNTY OF _____

BEFORE ME, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that (he) (she) executed the same for the purposes therein expressed.

Given under my hand and seal of office on this the _____ day of _____,

Notary Public's Signature

Power of Attorney

STATE OF TEXAS

COUNTY OF _____

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STATE OF TEXAS

COUNTY OF _____

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Given under my hand and seal of office on this the _____ day of _____,

Notary Public's Signature