Power of Attorney

Information

WHAT IS A POWER OF ATTORNEY?

A Power of Attorney is a legal document in which a parent authorizes another adult to act in the parent's place on behalf of the child. A Power of Attorney is a "permission slip" which tells others, such as doctors or teachers, that when a parent's signature is needed, the other adult has authority to sign in place of a parent. By signing a Power of Attorney the parent does <u>not</u> give up any parental rights.

The parent retains all legal rights. With a Power of Attorney the parent shares the authority to make decisions with a designated adult.

In any Power of Attorney, the parent decides:

- which duties he/she wishes to share with the other adult, and
- the length of time that the Power of Attorney will be in effect.

A Power of Attorney can be used for a limited purpose such as taking a child to a specific doctor's appointment or registering a child for school. A Power of Attorney can also be used for broad purposes such as all decisions affecting the child for a six month period.

A Power of Attorney is only valid for up to six months. A Power of Attorney can be revoked by the parent at any time.

WHEN TO USE A POWER OF ATTORNEY

Powers of Attorney should be used when:

- a parent has left his/her child in the custody of another person and is not able to be contacted should an emergency arise; or
- a child is living in a separate home from his/her parents; or
- an adult other than a parent is the child's main caregiver.

DIRECTION FOR SIGNING A POWER OF ATTORNEY

- A Power of Attorney must be signed by the parent in the presence of a Notary Public.
- The Caregiver keeps the original Power of Attorney with them as proof of their authority to make decisions on behalf of a child.

When a parent has given a Power of Attorney to a primary caregiver of a child, the caregiver should have the following documents for their records:

- 1. Original notarized copy of the Power of Attorney
- 2. Child's Birth Certificate
- 3. Child's Medicaid or other insurance card

POWER OF ATTORNEY for a minor child

I declare that I am the PARENT a	and/or LEGAL GUARDIAN,
PARENT NAME	
BIRTH DATE	
SOCIAL SECURITY #	
CITY/STATE of RESIDENCE	
of this minor CHILD,	
CHILD NAME	
BIRTH DATE	
SOCIAL SECURITY #	
CITY/STATE of RESIDENCE	
fact, to act in my name, place and st made and/or authorization given for matters, participation in religious or I authorize the Caregiver in this ever purposes as I might do or could do if	eby appoint this CAREGIVER, my true and lawful attorney in ead, in the event that I am unavailable and a decision must be the above named child regarding medical treatment, education recreational activities or in any other matters involving my child. In to take any and all steps, as fully and for all intents and personally present. I understand that pursuant to the statute this in the from the date executed and I may renew it at that time.
CAREGIVER NAME	
BIRTH DATE	
SOCIAL SECURITY #	
CITY/STATE of RESIDENCE	
I declare under penalty or pethe foregoing is true and corr	rjury under the laws of the state of New Mexico that ect.
PARENT SIGNATURE	Print Parent Name
NOTARY PUBLIC ACKNOWLEDGMENT (Photo Identification, Signature Witnessing & Notary Seal Required) This affidavit was subscribed, sworn to and acknowledged before me this, the day of the month of, 201	
NOTARY PUBLIC My Commission Expires	(Seal)