

## LETTER REQUESTING POWER OF ATTORNEY

Date \_\_\_\_\_

Dear Parent/Guardian:

I understand that you wish to have your child reside with an adult other than his or her parent, legal guardian, or managing conservator and attend school in Tulia Independent School District. The District requires that a Power of Attorney be provided, clarifying which adult will be responsible for your child.

A suggested Power of Attorney form is enclosed. Please note that you are not required to use this particular form, although it does contain those items required by the District to be included in a Power of Attorney. This Power of Attorney is revocable at any time, and the District should be notified within five days of such revocation. Also note that the duration of this Power of Attorney is for the current school year only.

If you have any questions, please do not hesitate to call the office of the Superintendent at 806-995-4591.

Sincerely,

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Signature of District representative