

Power-of-Attorney

STATE OF Missouri)
)
COUNTY OF Boone) ss

KNOW YE ALL MEN BY THESE PRESENTS,

That I, _____, of
Full legal name

Street Address City State Zip Phone #

do hereby make, constitute and appoint _____

Street Address City State Zip Phone #

as my true and lawful Attorney-in-Fact, for me and in my name, place and stead to:

Sign all documents concerning financial aid and registration at the University of Missouri-Columbia including applications, promissory notes, and endorsement of checks while I am studying abroad in _____ from _____ to _____.

I further give and grant to my said Attorney-in-Fact, full power and authority to do and perform every act necessary and proper to be done in the exercise of any of the foregoing powers as fully as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said Attorney-in-Fact shall lawfully do, or cause to be done by virtue hereof.

This instrument may not be changed orally.

Dated _____, 20____ in Columbia, Missouri.

(Signed) _____

=====

CERTIFICATE OF NOTARY

STATE OF Missouri)
) ss
COUNTY OF Boone)

On this _____ day of _____ 20____, before me, the undersigned notary public personally came and appeared _____, known to me to be the person whose name is subscribed in and who executed the foregoing instrument, and who duly acknowledged to me that he/she executed same for the purpose therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

Notary Public _____

My commission expires: