



POWER OF ATTORNEY FOR TEMPORARY GUARDIANSHIP

This is to certify that I am the parent/legal guardian of _____
Child's full name

and as such, I authorize and direct _____
Guardian's full name and relationship

to act as guardian for him/her from _____ to _____
Date Date

Parent/Legal Guardian's Name

Parent/Legal Guardian's Signature

Date

Subscribed and sworn before me this _____ day of _____ year _____

Notary Public

Address