

### Millard School District DURABLE POWER OF ATTORNEY

The undersigned Grantor(s) is/are the custodial parent(s) or legal guardian(s) of \_\_\_\_\_, a minor child (the "Student"). Pursuant to Section § 53A-2-201(3) Utah Code Ann. 1953 (1995), Grantor(s) hereby designate(s) \_\_\_\_\_ (Custodian/s), living at \_\_\_\_\_ as the Custodian(s) of the Student, and grant(s) to said Custodian(s) a Durable Power of Attorney with full authority to take any appropriate action in the interests of the Student, including authorization for education or medical services. Such action shall have the same force and effect, and shall bind the undersigned Grantor(s), their heirs and assigns, to the same degree as would have been the case had the action been taken by the Grantor(s).

Grantor(s) agree(s) to assume full responsibility for payment of any fees or other charges relating to the Student's education in the Millard School District. If eligibility for fee waivers is claimed under §53A-12-103, Grantor(s) also agree(s) to provide all financial information requested by the Millard School District in determining eligibility for fee waivers.

This Durable Power of Attorney shall remain in force until the earliest of the following:

- A. The Student reaches the age of eighteen (18), marries, or becomes emancipated;
- B. The following date: \_\_\_\_\_;
- C. This Durable Power of Attorney is revoked or rendered inoperative by the Grantor(s), Custodian(s), Grantor (Millard School District) or a court of competent jurisdiction.

***This Durable Power of Attorney does not confer legal guardianship.***

**Grantor(s):**

\_\_\_\_\_ On this \_\_\_\_\_ day of \_\_\_\_\_ personally appeared before me \_\_\_\_\_, the Grantor(s), personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is signed, and acknowledged to me that he/she/they signed it voluntarily for its stated purpose.

(Seal)

\_\_\_\_\_  
*Notary Public*

**Custodian(s):**

\_\_\_\_\_ On this \_\_\_\_\_ day of \_\_\_\_\_ personally appeared before me \_\_\_\_\_, the Custodian(s), personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is signed, and acknowledged to me that he/she/they signed it voluntarily for its stated purpose.

(Seal)

\_\_\_\_\_  
*Notary Public*

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**Millard School District (grants  does not grant  residence under the above Power of Attorney.**

\_\_\_\_\_  
*For Millard School District*