Created: 11-22-2019 Modified: 4/30/2020

FORM A-1

UINTAH SCHOOL DISTRICT DURABLE POWER OF ATTORNEY

(Under Utah Code § 53G-6-302)

The undersigned Grantor is the custodial parent(s) or legal guardian(s) of a minor child (herein "Student").
, a minor child (herein "Student"). Pursuant to Utah Code § 53G-6-302, Grantor(s) hereby designates, who by relationship is the
Student's, and who resides at as the Custodian of Student and
grants to Custodian a Durable Power of Attorney with full authority to take any appropriate action, including authorization for educational or medical services, in the interests of the Student. Such action shall have the same force and effect and shall bind the undersigned Grantors, the Grantors' heirs and assigns, to the same degree as would have been the case had the action been taken by the Grantors.
Grantors agrees to assume full responsibility for payment of any fees or other charges relating to the Student's education in Uintah School District. If eligibility for fee waivers is claimed under Utah Code § 53G-7-504, or application is made under other programs requiring financial information (such as for free or reduced school lunch) Grantors also agrees to provide all financial information requested by the school district in determining eligibility.
This Durable Power of Attorney shall not be affected by the disability of the Grantors and shall remain in effect until the earliest of the following:
a. The Student reaches the age of 18, marries, or becomes emancipated;b. The following expiration date:; or
c. This Durable Power of Attorney is revoked or rendered inoperative by the Grantor, the Custodians, or by order of a court of competent jurisdiction. I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
Signed on the day of, at Day Month Year City or other location and state or county
Printed Name
Signature
I declare under criminal penalty under the law of Utah that the foregoing is true and correct.
Signed on the day of, at City or other location and state or county
Printed Name
Signature

THIS POWER OF ATTORNEY DOES NOT CONFER LEGAL GUARDIONSHIP

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FORM A-2 ACCEPTANCE OF DESIGNATION AS CUSTODIAN

The undersigned accepts the designation as Custodians of the Student and agrees to take appropriate action, including authorization for educational or medical services, in the interests of the Student. The undersigned also agrees to assume responsibility for payment of any fees or other charges relating to the Student's education in Uintah School District. If eligibility for fee waivers is claimed under Utah Code § 53G-7-504, or application is made under other programs requiring financial information (such as for free or reduced school lunch) the undersigned also agrees to provide all financial information requested by the school district in determining eligibility.

I declare under ci correct.	riminal p	enalty un	der the lav	v of Uta	h that the foregoing is true and
Signed on the		day of _		_,	atCity or other location and state or county
	Day		Month	Year	City or other location and state or county
Printed Name					
Signature					
Signature					
l declare under cocorrect.	riminal p	enalty un	der the lav	v of Uta	h that the foregoing is true and
Signed on the		day of			at
	Day	,	Month	Year	at City or other location and state or county
D					
Printed Name					
Signature					

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FORM A-3 Affidavit Granting Guardianship

I,			, the			
	(Print Name)		(legal relationship)			
of	(Nan	ne of Student)	give guardianship of			
him/her	to(Name of Re	enonsible Adult who	o will act as Guardian)			
	(Name of Ke	sponsible Addit who	o will act as Guardian)			
	ne said student lives as a ng schools in the District		dent of Uintah School District			
I affirm	the following:					
a)	I verify that the child's of attending the public		district is not for the primary purpose			
b)) I have determined that the child's physical, mental, moral or emotional health would be best served by transfer of guardianship;					
c)	I am aware that designation of a guardian is equivalent to a Court established guardianship and will suspend or terminate any existing parental or guardianship rights in the same manner as a court-established guardianship;					
d)	d) I consent and submit to suspension or termination of parental or guardianship rights;					
e)) I submit to jurisdiction of Utah State courts in which the District is located for any action related to guardianship or custody of the student;					
f)	I designate as my agent (Responsible Adult who will act as Guardian) to accept service of process and notice regarding custody and guardianship matters; and					
g)	I verify that it is my inte the District under the s		ent become a permanent resident of responsible adult.			
I declare	e under criminal penalty ur	nder the law of Uta	ah that the foregoing is true and correct.			
Signed of	on the day of _	,	_ at			
J	Day	Month Year	at City or other location and state or county			
Printed I	Name					
Signatur	-e					