

## Power of attorney

I the undersigned:

Name		Cpr-nummer (Danish civil reg. no.)
Adress		
Postal code	City	
Phone no.		

authorise:

Name		Cpr-nummer or cvr-nummer
Adress		
Postal code	City	
Phone no.		

to, on my behalf, handle my case with the Danish Agency for Institutions and Educational Grants. It means that the above-mentioned person is my party's representative.

This power of attorney does not give the right to make self-service or see information in minSU. For that purpose you need another type of power of attorney, a "selvbetjeningsfuldmagt". [See su.dk](http://su.dk).

The power of attorney shall apply from (write the date):

day	month	year

The power of attorney applies for your current education. If you change education, you must give a new power of attorney. You may revoke the power of attorney at any time by informing the Danish Agency for Institutions and Educational Grants.

The power of attorney applies to:      my whole case      parts of my case

    

If the power of attorney only applies to parts of your case, please write which parts here:

We can not send all letters about your case to both you and the holder of the power of attorney- for example, certain decisions and "støttemeddelelser" (messages relating to SU) will be sent to you only.

If you send the power of attorney by mail, please sign below. If you send as Digital Post, your NemID is your signature.

Place/date

Mandatory's signature

If you have a NemID, you can forward the form to [Styrelsen for Institutioner og Uddannelsesstøtte](http://Styrelsen for Institutioner og Uddannelsesstøtte) via Digital Post on borger.dk/from e-Boks.

You can also send the form to:

Styrelsen for Institutioner og Uddannelsesstøtte, Uddannelsesstøtte, Bredgade 43, 1260 København K.