

# Power of Attorney

## Information

### **WHAT IS A POWER OF ATTORNEY?**

A Power of Attorney is a legal document in which a parent authorizes another adult to act in the parent's place on behalf of the child. A Power of Attorney is a "permission slip" which tells others, such as doctors or teachers, that when a parent's signature is needed, the other adult has authority to sign in place of a parent. By signing a Power of Attorney the parent does not give up any parental rights.

**The parent retains all legal rights.** With a Power of Attorney the parent shares the authority to make decisions with a designated adult.

In any Power of Attorney, the parent decides:

- which duties he/she wishes to share with the other adult, and
- the length of time that the Power of Attorney will be in effect.

A Power of Attorney can be used for a limited purpose such as taking a child to a specific doctor's appointment or registering a child for school. A Power of Attorney can also be used for broad purposes such as all decisions affecting the child for a six month period.

A Power of Attorney is only valid for up to six months. A Power of Attorney can be revoked by the parent at any time.

### **WHEN TO USE A POWER OF ATTORNEY**

Powers of Attorney should be used when:

- a parent has left his/her child in the custody of another person and is not able to be contacted should an emergency arise; or
- a child is living in a separate home from his/her parents; or
- an adult other than a parent is the child's main caregiver.

### **DIRECTION FOR SIGNING A POWER OF ATTORNEY**

- A Power of Attorney must be signed by the parent in the presence of a Notary Public.
- The Caregiver keeps the original Power of Attorney with them as proof of their authority to make decisions on behalf of a child.

When a parent has given a Power of Attorney to a primary caregiver of a child, the caregiver should have the following documents for their records:

1. Original notarized copy of the Power of Attorney
2. Child's Birth Certificate
3. Child's Medicaid or other insurance card

# POWER OF ATTORNEY for a minor child

I declare that I am the **PARENT** and/or **LEGAL GUARDIAN**,

**PARENT NAME**

BIRTH DATE

SOCIAL SECURITY #

CITY/STATE of RESIDENCE

of this minor **CHILD**,

**CHILD NAME**

BIRTH DATE

SOCIAL SECURITY #

CITY/STATE of RESIDENCE

Pursuant to 45-5-104 NMSA, do hereby appoint this CAREGIVER, my true and lawful attorney in fact, to act in my name, place and stead, in the event that I am unavailable and a decision must be made and/or authorization given for the above named child regarding medical treatment, education matters, participation in religious or recreational activities or in any other matters involving my child. I authorize the Caregiver in this event to take any and all steps, as fully and for all intents and purposes as I might do or could do if personally present. I understand that pursuant to the statute this power of attorney terminates six months from the date executed and I may renew it at that time.

**CAREGIVER NAME**

BIRTH DATE

SOCIAL SECURITY #

CITY/STATE of RESIDENCE

**I declare under penalty or perjury under the laws of the state of New Mexico that the foregoing is true and correct.**

\_\_\_\_\_  
**PARENT SIGNATURE**

\_\_\_\_\_  
**Print Parent Name**

## NOTARY PUBLIC ACKNOWLEDGMENT

*(Photo Identification, Signature Witnessing & Notary Seal Required)*

This affidavit was subscribed, sworn to and acknowledged before me this,

the \_\_\_\_\_ day of the month of \_\_\_\_\_, 201\_\_\_\_\_.

\_\_\_\_\_  
**NOTARY PUBLIC**

\_\_\_\_\_  
**My Commission Expires**

(Seal)