

Power of Attorney

Personal details

Full name	
Address	
Telephone	Email

I hereby confirm that the person above or the person they appoint in their place is my representative.

My representative has power of attorney to represent me in a matter concerning a:

- | | |
|---|---|
| <input type="checkbox"/> Residence permit | <input type="checkbox"/> Residence status |
| <input type="checkbox"/> Work permit | <input type="checkbox"/> citizenship |
| <input type="checkbox"/> Visa | <input type="checkbox"/> Public council |
| <input type="checkbox"/> Alien's passport | <input type="checkbox"/> Refusal of entry |
| <input type="checkbox"/> travel document | <input type="checkbox"/> Expulsion |
| <input type="checkbox"/> Permanent right of residence | |

My representative also has power of attorney to represent me in a case where I represent a child under 18 years.

My representative can submit an application, appeal a decision or judgment and request a reconsideration on my behalf. My representative may access any documents and receive notifications or service. In addition, my representative may perform all the measures required and appear for me.

Personal details of the person in question

Full name	
Address	
Telephone	Email

Signature

Place and Date	Signature

Printed name	