

POWER OF ATTORNEY FOR CARE OF A MINOR CHILD

is authorized by T.C.A. § 24-6-201 et seq. Completion of this form

along with the proper signatures is sufficient to authorize enrollment of a minor in

the physical or mental condition of the parent or legal guardian or the child is such that care and supervision of the child cannot be provided;

the loss or uninhabitability of the child's home as a result of a natural disaster;

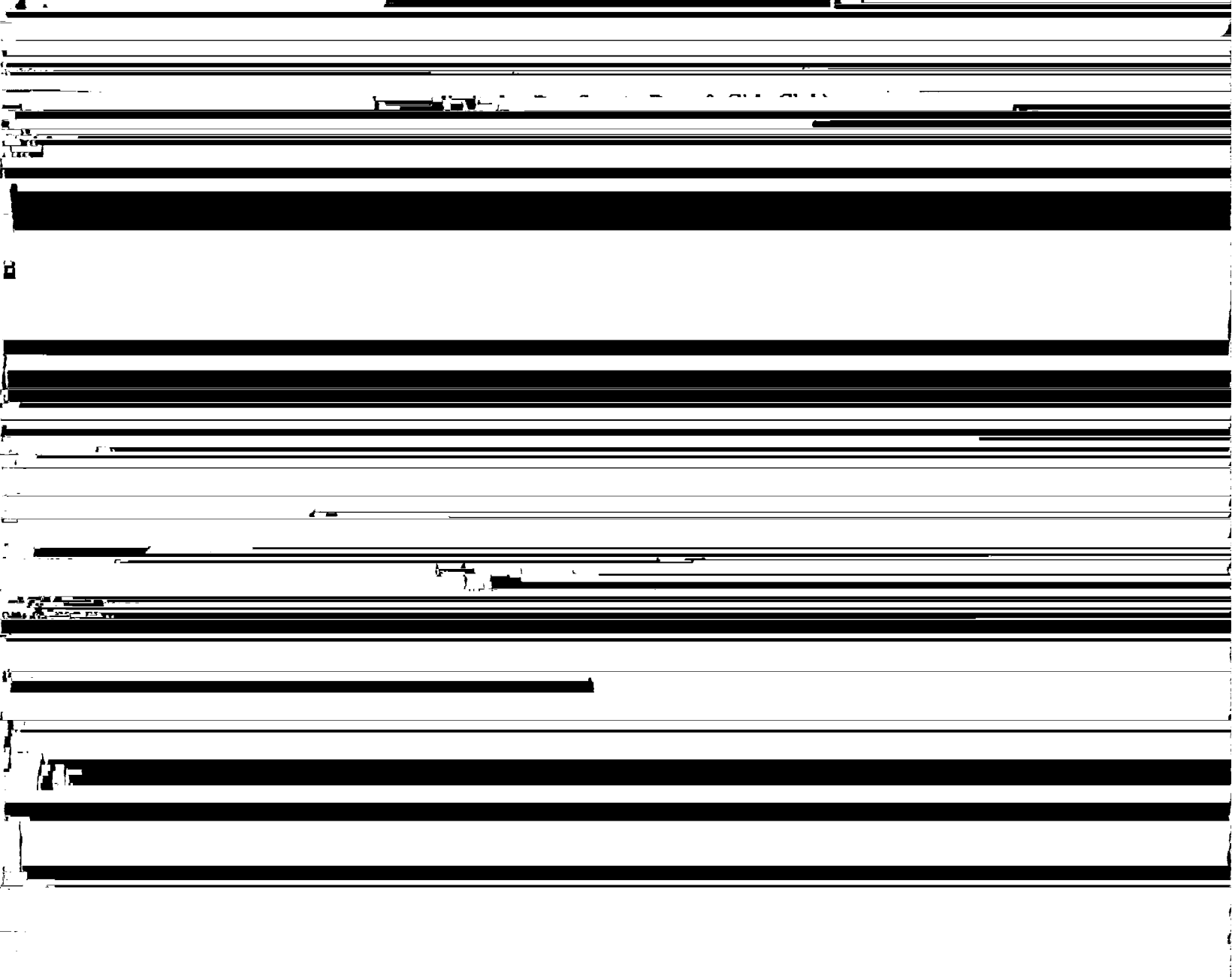
the need for medical or mental health treatment (including substance abuse treatment) by the parent or legal guardian; or,

other (please describe)

\_\_\_\_\_

7.  I/We the undersigned, authorize the named caregiver to do one or more of the following:

enroll the child in school and *extracurricular activities* (including



12.  I understand that, prior to enrollment, the local education agency may require documentation of the minor child's residence with a caregiver and/or documentation or other verification of the validity of the stated hardship.

13.  I understand that, except where limited by federal law, I shall be assigned the rights, duties, and responsibilities that would otherwise be assigned to the parent, legal guardian or legal custodian pursuant to Tennessee Code Annotated Title 40

Date: \_\_\_\_\_

**Father/Legal Guardian**

The Father/Legal Guardian, \_\_\_\_\_, personally appeared  
before me this \_\_\_\_\_ day of \_\_\_\_\_, 2003.

My commission expires:

STATE OF TENNESSEE )  
COUNTY OF \_\_\_\_\_ )

Date: \_\_\_\_\_

Caregiver

NOTARY PUBLIC

My commission expires:

**REVOCATION OF POWER OF ATTORNEY FOR CARE OF A MINOR CHILD**

*As provided for in T.C.A. § 34-6-301 et seq. revocation of any previously executed*