

# POWER OF ATTORNEY WITH AFFIDAVIT OF PARENT CONSENT FOR GUARDIAN APPOINTMENT

STATE OF ARIZONA)

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COUNTY OF NAVAJO)

I, We, \_\_\_\_\_ (Parent's Name), after being duly sworn, do solemnly swear as follows:

1. I am a, We are member(s) of the Navajo Tribe and reside in Kayenta, Arizona.  
I am (We are) the natural parents of:  
Name of Child: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Census#: \_\_\_\_\_  
Name of Child: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Census#: \_\_\_\_\_  
Name of Child: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Census#: \_\_\_\_\_  
Name of Child: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Census#: \_\_\_\_\_

The above-named child/children will be attending Kayenta Boarding School for the **2021-2022 academic year**.

2. During the time the above-named child/children will be attending Kayenta Boarding School they will be living with, \_\_\_\_\_ (Appointee's Name) who is related to him/her as \_\_\_\_\_ (Relationship to child).
3. I, We, do hereby make, constitute and appoint \_\_\_\_\_ (Appointee's Name), as my true and lawful attorney for the purpose of performing all the parental responsibilities as I/We might perform myself/ourselves with regard of my minor child/children above-named. This Power of Attorney is effective for **2021-2022 academic year**. Although I will continue to be informed of my child/children progress and activities at Kayenta Boarding School.
4. \_\_\_\_\_ (Appointee's Name) has my consent to act as legal guardian to the above-named child/children and has all power necessary for the proper care and control of my child/children during the **2021-2022 academic year** including the power to approve medical treatment for my child/children.
5. This guardianship agreement is temporary and will expire at the end of the school year unless I revoke it at an earlier time by a sworn written affidavit.
6. I, We, \_\_\_\_\_ (Parent's Name) do solemnly swear that the foregoing is true and to the best of my knowledge.

\_\_\_\_\_  
Parent(s) signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Print Name(s)

*Subscribed and sworn to me before this* \_\_\_\_\_ *day of* \_\_\_\_\_

*Notary Public:* \_\_\_\_\_