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 appointment or registering a child for school. A Power of Attorney can also be used for broad purposes such as all decisions regarding care, custody, or property of the minor child for a six-month period.

A Power of Attorney is only valid for up to six (6) 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 a parent or legal guardian 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

This Form is authorized by New Mexico Statute: 45-5-104 NMSA 1978.
POWER OF ATTORNEY for a minor child

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

<table>
<thead>
<tr>
<th>PARENT NAME</th>
<th>BIRTH DATE</th>
<th>SOCIAL SECURITY #</th>
<th>CITY/STATE of RESIDENCE</th>
</tr>
</thead>
</table>

of this minor CHILD,

<table>
<thead>
<tr>
<th>CHILD NAME</th>
<th>BIRTH DATE</th>
<th>SOCIAL SECURITY #</th>
<th>CITY/STATE of RESIDENCE</th>
</tr>
</thead>
</table>

Pursuant to Statute 45-5-104 NMSA, I 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 for any of my powers regarding care, custody or property of the minor child or protected person, including, but not limited to medical treatment, education matters, participation in religious or recreational activities. I understand I am not, and cannot, delegate the power to consent to marriage or adoption of a minor protected person. 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 (6) months from the date executed and I may renew it at that time.

<table>
<thead>
<tr>
<th>CAREGIVER NAME</th>
<th>BIRTH DATE</th>
<th>SOCIAL SECURITY #</th>
<th>CITY/STATE of RESIDENCE</th>
</tr>
</thead>
</table>

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

<table>
<thead>
<tr>
<th>PARENT or LEGAL GUARDIAN SIGNATURE</th>
<th>Print Parent Name</th>
</tr>
</thead>
</table>

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 __________________, 20__________.

______________________________
NOTARY PUBLIC

My Commission Expires (Seal)