



UCSC Student's ID /Account Number (Do not use CRUZ ID)

UCSC Student's Last Name

First Name

2017-2018 Power of Attorney

Student Address City State Zip

Student Signature Student E-mail

I, \_\_\_\_\_, do hereby appoint

Power of Attorney ( ) Daytime Phone

Address

City State Zip E-mail

My Attorney-in-Fact to act in my name, place and stead, in any way which I myself could do, including, but not limited to the following: to affirm affidavits, sign educational loan applications and promissory notes, accept or decline offers of financial aid, endorse and negotiate any checks which I receive for educational purposes, communicate with Financial Aid and Scholarship officers regarding the status and contents of my financial aid file and application.

This Power of Attorney commences on \_\_\_\_\_ Date and expires on \_\_\_\_\_ Date, or [ ] until further notice.

IN WITNESS WHEREOF: I have hereunto signed my name on this date: \_\_\_\_\_ .

This form must be signed in the presence of a Notary Public.

NOTARY PUBLIC CERTIFICATION:

Original: Power of Attorney
Copies: Student, Financial Aid & Scholarship Office, Student Business Services Office

RETURN TO: UC Santa Cruz Financial Aid and Scholarship Office, 205 Hahn Student Services Building, 1156 High Street, Santa Cruz, CA 95064
Phone: (831) 459-2963 Web: financialaid.ucsc.edu. For your protection and security, please do not e-mail forms.