DURABLE LIMITED POWER OF ATTORNEY

EDUCATION FREEDOM SCHOLARSHIP (EFS) ACCOUNT

INSTRUCTIONS

A student who reaches the age of majority (18 years) must become the Account Holder of the student's EFS unless the Tennessee Department of Education (TDOE) receives either:

- 1.) a valid power of attorney (POA) executed by the student, designating the student's parent or caretaker as their agent, or
- 2.) a conservatorship order issued by a judge, appointing the student's parent or caretaker as their conservator.

This **optional form** allows an adult student to appoint someone other than the student to be the EFS Account Holder. This is a **limited** durable POA, which only transfers the minimum rights necessary for participation in the EFS Program and will not be accepted for other purposes, such as general banking and medical. The student may wish to provide TDOE with a more exhaustive POA that includes the transfer of other rights, in addition to those listed below.

Disclaimers: This POA is only valid if the student has the mental capacity to understand its nature and purpose and can knowingly transfer the included rights to the student's parent or caretaker. The providing of this form does not constitute legal advice by TDOE. Families are encouraged to seek legal counsel to address any questions regarding powers of attorney and conservatorships, as they relate to their specific circumstances.

l,	_ [Student/Principal] of
	_ [Address], authorize
	_ [Parent/Agent] of
	_ [Address], as my agent
(attorney-in-fact) to act for me and in my name and for my use and benefit.	

1. Powers.

The agent (or the agent's successor) shall have full power and authority to undertake and perform only the following acts on my behalf:

- 1) Make banking and financial decisions and transactions, limited to management, control, and access to my EFS; and
- **2)** Make educational decisions regarding my enrollment and participation in the EFS Program.

2, Uniform Durable Power of Attorney Act.

This power of attorney is to be construed and interpreted as a durable limited power of attorney consistent with the Tennessee "Uniform Durable Power of Attorney Act "and shall not be affected by my subsequent disability or incapacity, pursuant to Tenn. Code. Ann. § 34-6-102.

3. Effective.

This POA is effective upon execution and shall rema by me in writing. Any person relying on this power of rely upon the authority of my attorney-in-fact until r	of attorney shall have full rights to accept and
Executed today,	[Date]
	[Print name of Student]
	[Signature of Student]
I declare under penalty of perjury under the laws of and correct.	the State of Tennessee that the foregoing is true
STATE OF TENNESSEE	
COUNTY OF	
Principal / Student	Date
The Principal/Student,	, personally appeared
before me this day of, 20	
My commission expires:	NOTARY PUBLIC