

Tax stamps

30 Baht

**Power of Attorney**

## Written at : ……………………………………………

Date: …………………………………………….

 I, (Mr. /Mrs. /Ms.)……………………………………………………………………... Age : ………….….. years,
holder the identity card No. …………………………………………… Address : ……………………………………………………………

……………………………………………………………………………………………………………………………………………………………………………
State/Province : ………………………………. Zip : ……………………………. Country : …………………………………………
Telephone Number : ……………………………………………………, hereby authorized ………………………………….. as my representative, with full authority to (check box with ✓ symbol) :

 1. Be an applicant to apply for receiving the student allowance in accordance with Mahidol University Notification Re: Rule of student allowance disbursement of Mahidol University B.E. 2559 (A.D. 2016), including to amend the statements of Application of student allowance receiving, Mahidol University and relating voluntary statement until completion;

 2. Be a payee of the allowance amount …………………………………………….. Baht from Mahidol University.

 I hereby ratify and confirm that all acts and things done by …………………………………………………………………………………….. shall be regarded as having been done and be responsible by me in all respects.

 Signed …………………………………………. Grantor

 (…………………………………………)

 Signed …………………………………………. Attorney

 (………………………………………....)

 Signed …………………………………………. Witness

 (…………………………………………)

 Signed …………………………………………. Witness

 (…………………………………………)