

Campus Sorø

Admission Office

Professionshøjskolen Absalon Slagelsevej 70-74 4180 Sorø

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Admission 2019

Power of attorney

Name:

CPR-Number or Birthday:

Date:

Grand power of attorney to

Name or Agency:		
Addresses:		
Postal code:	City:	Phone:
E-mail:		

Date: Signature:

Signature:

This is only valid in the application year 2019.

On my behalf to apply for The Bachelor of Engineering in Biotechnology or The Teacher Education at University College Absalon. I also grand power of attorney to accept an offered study place.