

Admission 2019

Power of attorney

Name:
CPR-Number or Birthday:

Date: _____ Signature: _____

Grand power of attorney to

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

Date: _____ 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.