

Authorization Letter

Date: [Insert Date]

To Whom It May Concern,

I, [Your Full Name], residing at [Your Address], am the legal representative of [Name of the Individual/Minor], who is currently enrolled at [Name of Educational Institution].

This letter serves to authorize [Authorized Person's Name], to act on my behalf concerning all educational matters pertaining to [Name of the Individual/Minor]. This includes, but is not limited to, gathering academic records, discussing educational progress with faculty, and signing necessary documents.

This authorization is valid from [Start Date] until [End Date] or until further notice is given in writing.

Should you have any questions or require further confirmation, please feel free to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your Relationship to the Individual/Minor]