

POWER OF ATTORNEY FOR CARE OF MINOR CHILDREN

Use of this form is authorized by T.C.A. § 34-6-301 et seq. Completion of this form, along with the proper signatures, is sufficient to authorize enrollment of a minor in school and to authorize medical treatment. However, a school district may require additional documentation/information as permitted by this section of Tennessee law before enrolling a child in school or any extracurricular activities.

Part I: To be filled out and/or initialed by parent(s).

1. Minor Children's Names Ayanna Alise Leigh and Wayland Tallis Petrowski

2. Mother/Legal Guardian's Name & Address Erica Nichole Petrowski

684 Hobbs St.

Memphis, Tn. 38111

3. Caregiver's Name & Address Teresa D. Petrowski

5076 Williams Rd.

Byhalia, MS. 38611

4. Care-giving authority regarding the minor children is being given to the caregiver because of the following type of hardship (check at least one):

the serious illness or incarceration of a parent or legal guardian;

the physical or mental condition of the parent or legal guardian or the children is such that care and supervision of the children cannot be provided;

the loss or uninhabitability of the children's home as a result of a natural disaster;

the need for medical or mental health treatment (including substance abuse treatment) by the parent or legal guardian; or,

other (please describe) Injuries sustained in automobile accident resulting in long term medical treatment and rehabilitation.

Preparer

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5. I/the undersigned, authorize the named caregiver to do one or more of the following:
- enroll the children in school and extracurricular activities (including but not limited to Boy Scouts, Boys & Girls Club)
 - obtain medical, dental, and mental health treatment for the children, and
 - provide for the children's food, lodging, housing, recreation and travel.
- I/We grant the following additional power to the named caregiver: To handle all financial transactions, decisions, payments, & benefits on behalf of Ayanna Alise Leigh and Wayland Tallis Petrowski as she deems necessary. To provide such care as would be given were she the children's biological mother. To legally act on their behalf in any way necessary in order to secure their financially safe and healthy future.
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Part II: To be initialed by caregiver.

10. (*RP*) I understand that this document, properly executed, gives me the right to enroll the minor children in the local education agency serving the area where I reside.
11. (*RP*) I understand that, prior to enrollment, the local education agency may require documentation of the minor children's residence with a caregiver and/or documentation or other verification of the validity of the stated hardship.
12. (*RP*) I understand that, except where limited by federal law, I shall be assigned the rights, duties, and responsibilities that would otherwise be assigned to the parent, legal guardian or legal custodian pursuant to Tennessee Code Annotated Title 49.
13. (*RP*) I understand that, if either minor child ceases to reside with me, I am required by law to notify any person, school or health care provider to whom I have given this document.

Part III: To be initialed by parent(s) and caregiver.

14. (EP) (4) We understand that, by accepting the power of attorney, if we enroll a student in a school system while fraudulently representing the children's current residence or the parents' hardship or circumstances for using the power of attorney, either or both of us is liable for restitution to the school district for an amount equal to the per pupil expenditure for the district in which the student is fraudulently enrolled. Restitution shall be cumulative for each year the child has been fraudulently enrolled in the system and may include costs and fees related to litigation.

I/We declare under penalty of perjury under the laws of the State of Tennessee that the foregoing is true and correct.

STATE OF TENNESSEE)
COUNTY OF _____)

Erica N. Petrowski
Mother/Legal Guardian

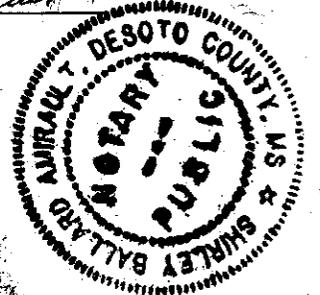
Date: 2/15/08

The Mother/Legal Guardian, Erica N. Petrowski, personally appeared before me this 15th day of February, 2008.

Shirley B. Amundson
NOTARY PUBLIC

My commission expires:
March 15, 2008

STATE OF TENNESSEE)
COUNTY OF Desoto)



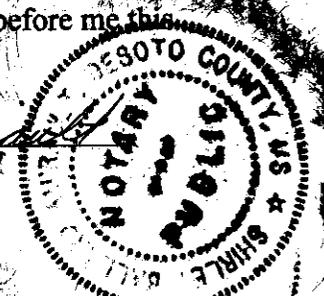
Jessica D. Petrowski
Caregiver

Date: 2/15/08

The Caregiver, Jessica D. Petrowski, personally appeared before me this 15th day of February, 2008.

Shirley B. Amundson
NOTARY PUBLIC

My commission expires:
March 15, 2008



NOTICE TO THE LOCAL EDUCATION AGENCY AND/OR HEALTH CARE PROVIDER:

Pursuant to T.C.A. § 34-6-308, no person, school official or health care provider who acts in good faith reliance on a power of attorney for care of a minor child to enroll the child in school or provide medical, dental, or mental health care, without actual knowledge of facts contrary to those authorized, is subject to criminal or civil liability to any person, or is subject to professional disciplinary action for such reliance. This section shall apply even if medical, dental, or mental health care is provided to a minor child or the child is enrolled in a school in contravention of the wishes of the parent with the legal custody of the minor child, as long as the person, school official or health care provider has been provided a copy of an appropriately executed power of attorney for care of a minor child, and has not been provided written documentation that the parent has revoked the power of attorney for care of a minor child.

Additionally, pursuant to T.C.A. § 34-6-310, a person who relies on the power of attorney for care of a minor child has no obligation to make any further inquiry or investigation. Nothing in this part shall relieve any individual from liability for violations of other provisions of law.

Prepared by
Teresa D. Petrowski
5076 Williams Rd.
Byhalia, Ms. 38611
662-838-9032