

POWER OF ATTORNEY

I the undersigned

Applicant's name	Applicant's date of birth
Applicant's address	
The applicant's personal ID or CPR no. if applicable*	

**Only applicable if you are already in Denmark or have been in Denmark before and have been assigned a personal Danish ID or CPR number*

hereby grant

Company Aarhus University
Address of holder of power of attorney Nordre Ringgade 1, 8000 Aarhus C
CVR no. or CPR no. of the holder of power of attorney 31119103

Aarhus University

Nordre Ringgade 1
DK-8000 Aarhus C

Email: au@au.dk
Tel: +45 8715 0000

power of attorney to represent me during the processing by the Danish Agency for International Recruitment and Integration (SIRI) of my application for a work and residence permit in Denmark.

This means that the holder of the power of attorney among other things has the right to

- Submit an application for a residence permit on my behalf,
- Receive right of access to the documents in my case,
- Submit statements for use in the processing of the case,
- Receive confidential and personal information contained in the application and in my case, and
- Receive information in case of cancellation or revocation of my permit

I furthermore grant SIRI power of attorney to forward the decision of my application to the Danish embassy for them to forward it to me. A copy of the permit shall also be forwarded to Aarhus University to their information.

The power of attorney will be valid during the processing of my application and for as long as the permit is valid. I am, however, at any time able to withdraw the power of attorney by informing SIRI as well as Aarhus University of this.

Place and date:	Applicant's signature:
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Website: www.au.dk