

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.

Website: www.au.dk

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

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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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