
POOBLASTILO POWER OF ATTORNEY

Podpisani

I,

, rojen

, born on

stanujoč na zgoraj navedenem naslovu, pooblašcam spodaj navedeno osebo (v nadaljevanju: pooblaščenec), da me zastopa pri Javnem skladu Republike Slovenije za razvoj kadrov in štipendije v postopku za pridobitev štipendije po *Javnem razpisu štipendij za študij državljanov Arabske republike Egipta in Republike Tunizije v Republiki Sloveniji (129. JR)* do dokončnosti odločbe ter za podpis pogodbe in v času trajanja pogodbenega razmerja, če mi bo štipendija po tem razpisu dodeljena.

/

residing at the above stated address, give full power of attorney to the person stated below (from here onwards: trustee) to represent my interests as a client with the Slovene Human Resources Development and Scholarship Fund during the administrative procedure of obtaining a scholarship under the *Public Call for Applications for Scholarships for Studies of Citizens of the Arabic Republic of Egypt and the Republic of Tunisia in the Republic of Slovenia (129. JR)* until the decision is final, as well as for signing the contract and during the the validity of the contract, should the scholarship be awarded to me.

Podatki o pooblaščenцу / Information about the trustee:

priimek in ime :

first and last name:

datum rojstva:

date of birth:

naslov (ulica in hišna št.):

address (street and no.):

naslov (poštna št. in kraj):

address (post no. and place):

št. telefona:

phone number:

e-poštni naslov:

e-mail address:

Sprejemam pooblastilo. / I accept the power of attorney.
