

ime in priimek kandidata / first and last name of the candidate

ulica in hišna številka stalnega bivališča stranke / street and house no. of permanent residence

pošta in kraj stalnega bivališča stranke / postal no. and place of permanent residence

država stalnega prebivališča / country of permanent residence

POOBLASTILO POWER OF ATTORNEY

Podpisani _____, rojen _____, stanujoč na _____
I, _____, born on _____, with residence at the

ime in priimek kandidata / first and last name of the candidate

datum rojstva kandidata / date of birth of the candidate

zgoraj navedenem stalnem naslovu, pooblaščam spodaj navedeno osebo (v nadaljevanju: pooblaščenec), da v mojem imenu sklene pogodbo o štipendiranju z Javnim skladom Republike Slovenije za razvoj kadrov in štipendije v zadevi *Javnega razpisa štipendij za podiplomski študij državljanov Republike Kosovo v Republiki Sloveniji* in da me zastopa v navedenem pogodbenem razmerju.

/
above stated permanent address, give full power of attorney to the person stated below (from here onwards: trustee) to sign in my name the scholarship contract with the Slovene Human Resources Development and Scholarship Fund in the matter of the *Public Call for Applications for Scholarships for Postgraduate Studies of citizens of the Republic of Kosovo in the Republic of Slovenia* and to represent my interests in the aforementioned contractual relationship.

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:

kraj in datum / place and date

lastnoročni podpis kandidata / signature of the candidate

Sprejemam pooblastilo. / I accept the power of attorney.

lastnoročni podpis pooblaščenca / signature of the trustee