Exhibit F — Power of Attorney

STATE OF TEXAS

COUNTY OF _____

KNOW ALL BY THESE PRESENTS:

That I, _____ *(parent)* with an address of _____ *(street address, city, state, zip),* do hereby appoint _____ *(name of attorney-in-fact)* as my true and lawful attorney-in-fact for me and in my name, place, and stead to take any and all actions and exercise any and all powers that I could take or exercise for the purpose of my child, _____ *(name),* in attendance in _____ School District as set forth below.

The following acts and powers are granted by this Power of Attorney:

1. To receive and discuss the student's class work with appropriate District employees.
2. To examine and receive copies of the student's _____ School District records and report cards.
3. To give permission for the student's participation in various activities such as, but not limited to, field trips and other student travel.
4. To be notified concerning medical problems and to give consent for the care and treatment of the student.
5. To be notified and consulted concerning the student's attendance and tardiness.
6. To give permission for any disciplinary actions involving the student by District employees.
7. To perform any other duties, responsibilities, and privileges normally afforded to the parents of students in the District.

I hereby ratify and confirm whatever such attorney-in-fact will and may do on behalf of the student by virtue of this Power of Attorney. This Power of Attorney may be voluntarily revoked in writing. A copy of any written revocation will be delivered to _____ School District within five calendar days of revocation. I declare that all powers given to my attorney-in-fact will be exercisable by my attorney-in-fact only for the _____ *(specify year)* school year, unless sooner revoked in writing.

IN WITNESS WHEREOF, I have hereunto set my hand this ____ *(date)* day of _____ *(month)*, _____ *(year)*.

Parent's signature: _____

STATE OF TEXAS

COUNTY OF _____

BEFORE ME, _____ *(insert the name and character of the officer),* on this day personally appeared _____ *(name),* known to me (or proved to me on the oath of _____ or through _____ *[description of identity card or other document]*) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that they executed the same for the purposes and consideration therein expressed.

GIVEN under my hand and seal of office on this the _____ *(date)* day of _____ *(month)*, _____ *(year)*.

_____
Notary Public, State of Texas