



**Kazakh Service Centre®**

1725 I (Eye) Street NW, Suite 300  
Washington, DC 20006 USA  
<https://kazakhservicecentre.com/>  
1-888-800-9339

We, \_\_\_\_\_, biological parents of

\_\_\_\_\_ authorize Kazakh Service Centre® to act on our behalf to obtain Kazakhstan Visas at the Kazakhstan Embassy (Consulates) in USA. Kazakh Service Centre® representative is authorized to drop-off and pick-up our documents to/from the embassy, high commission, consulate, diplomatic mission of the country of Kazakhstan while aiding us in processing our documents. Kazakh Service Centre® is also authorized to receive information about our applications from the aforementioned organizations while acting on our behalf. This Power of Attorney is valid for three years from the date of issuance.

Signed on this \_\_\_ day of the month of \_\_\_\_\_ in the year \_\_\_\_\_, in the city of

\_\_\_\_\_ in the state of \_\_\_\_\_, in USA.

Signature \_\_\_\_\_ name \_\_\_\_\_

**EMBASSY COPY**

Signature \_\_\_\_\_ name \_\_\_\_\_

Notary signature \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_



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**OFFICE COPY**

Signature \_\_\_\_\_ name \_\_\_\_\_

Signature \_\_\_\_\_ name \_\_\_\_\_

Notary signature \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_

Notary Stamp