|  |
| --- |
|  |
| **DELEGATION OF AUTHORITY FORM** |

|  |
| --- |
| To whom it may concernThis is to notify that ***(name of person being authorised)***, who holds the position of ***(position of the person being authorised)***, within ***(name of Beneficiary/Implementing Body/Line Ministry)***, is hereby authorised to act and sign on behalf of ***(name of person delegating authority)*** within ***(name of Beneficiary/Implementing Body/Line Ministry)***on: 1. all matters, or
2. on the following specific matters:
 |
|  |  |
|  |  |
| pertaining to: ***(code and name of operation/measure),*** (co)financed through ***(Insert relevant Fund)*** while the latter is away from office on duty travel overseas and on vacation and sick leave from ***(insert date)*** to ***(insert date)***. |
| **Delegated by**: |
|  |  |  |  |  |  |
| Name in block letters | Signature |
| **Accepted by**: |
|  |  |  |  |  |  |
| Name in block letters | Signature |
| Date: |  |  |
|  |
|  |

