POWER OF ATTORNEY (Mandate convention)

I, the undersigned:		
Surname		
Name		
Nationality		
Address of residence	Street :	House Number :
	City:	Postal Code :
	Country:	
Authorise Mister/Mada	im:	
Surname	T	
Name		
Nationality		
Address	Street :	House Number :
	City:	Postal Code :
1	Country:	
	rate of immigration shoul ess of the attorney indicated	
33	Street :	House Number :
Postal address	City:	Postal Code :
	Country :	
Signed in / on (place and date):		
Signature of the constituent :		Signed in / on (place and date):
Signature of the consti		Signed in / on (place and date): Signature of the delegate :

Information note on the protection of personal data

attorney »)

The Directorate of Immigration of the Ministry of Foreign and European Affairs collects and uses your personal data in the context of its public interest mission in implementation of the amended law of 29 August 2008 on the free movement of persons and immigration, and in compliance with the legal provisions on data protection. More detailed information on the processing of your data, as well as on your rights in the matter, are available on the website: https://maee.gouvernement.lu/en/services-auxcitoyens/visa-immigration.html