



**Kazakh Service Centre**

275 Slater Street, Suite 900 Ottawa,  
Ontario K1P 5H9  
<https://canada.kazakhservicecentre.com/>  
1-888-800-9339

I, \_\_\_\_\_, authorize Kazakh Service Centre to act on my behalf to obtain **Kazakhstan Visa** at the Kazakhstan Embassy in Canada. Kazakh Service Centre is authorized to drop-off and pick-up my documents to/from the embassy, high commission, consulate, diplomatic mission of the country of Kazakhstan while aiding me in processing my documents. Kazakh Service Centre is also authorized to receive information about my application from the aforementioned organizations while acting on my 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 province of \_\_\_\_\_, in Canada.

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

**EMBASSY COPY**

Witness signature \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_



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

**OFFICE COPY**

Witness signature \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_

Notary/ Commissioner Stamp