Medical Proxy Purpose and Instructions

Purpose

The purpose of the medical proxy is to ensure that team members, should they find themselves in a life-threatening medical emergency and are unable to make their own medical decisions, will receive medical care. The proxy grants team leaders/field staff the ability to make decisions on a team member's behalf if they are unable to do so for themselves. The notary provides an extra level of credibility in such delicate situations, especially in overseas contexts where a U.S. notary holds additional weight. In short, it is of tremendous value to the short-term team member to ensure they complete the medical proxy in full.

Instructions

	First, complete the information below and obtain a notary signature.		
	Then please ensure you send One Collective a digital copy of the original, completed signed proxy. You can complete this in one of two steps:		
	lacktriangle If your team is using the Profile site as part of your team process, please upload the		
	document to the portal. There is a Medical Proxy task to which you can upload the		
	document.		
	☐ If your team is not using the Profile site, send your digital copy to your team leader who will		
	ensure it gets forwarded to the appropriate One Collective staff/field coordinator.		
	Finally, regardless of how you submit your digital copy, please also give your signed, original proxy		
	to your team leader. The team leader will carry the original copies with them while in-community		
	should they need to present them to a medical practitioner		

Medical Proxy and Travel Consent for Minors

Note: A Notary Public seal is required to validate this document.

Medical Proxy

In case of emergency, I/we, the undersigned, understand that every effort will be made to contact the parent(s)/legal guardian(s) of the name(s)* of the child(ren) below. If I/we cannot be reached, I/we give permission to the physician(s) selected by team leadership to secure any treatment deemed necessary for my/our dependent(s) named below.

Travel Consent for Minors As parent(s)/legal guardian(s) of the child(ren) named below, I/we authorize my/our dependent(s) to travel outside of the United States as part of a One Collective team and under the direction of the team leader during the dates and to the destinations listed in the Travel Details section:			
Child's Name as Listed on Passport:			
Child's Name as Listed on Passport:			
Child's Name as Listed on Passport:			
Travel Details:			
Destination #1: City:	_ Country:		
Destination #2: City:			
Destination #3: City:	Country:		
Effective Dates of Travel: From/ To/			
Parent/Legal Guardian Signature(s):			
Both parents/legal guardians must sign below. If there is no second parent with legal custody of the child relevant paperwork such as a court decision, birth certificate naming only one parent, death certificate, etc., is strongly recommended.			
Though not the U.S., many other countries require this documentation, without which, the child and accompanying adult could be detained if questions arise and/or onward travel could be impeded.			
Signature of Parent/Legal Guardian:	Date:/		
Signature of Parent/Legal Guardian:	Date:/		
Public Notary			
State of County of			
This instrument was acknowledged and signed before me on/ If required, please include or attach the appropriate acknowledgment wording prescribed by your state.			
Notary Public Name: Nota	ry Public Signature:		
Stamp or Official Seal:			