Jonesport-Beals High School
180 Snare Creek Lane
Jonesport, Maine 04649
(207) 497-5454

I hereby authorize the Principal to forward a copy of my transcript, health records (if necessary), test records, current school year schedule, and any other required test records to any career oriented institution. This may include but is not limited to the following:

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Signature of Student Date

_____

Signature of Parent/Guardian
(If required)

DATE ADOPTED: JULY 1, 2003