



## RELEASE OF RECORDS

I, \_\_\_\_\_, the parent of \_\_\_\_\_,  
hereby authorize the \_\_\_\_\_ School District to release a copy of my  
child's permanent high school record to:

Bristol Bay Telephone Cooperative, Inc.  
Scholarship Committee  
P.O. Box 259  
King Salmon, AK 99613

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date