

Jackson Public Schools

Administrative Office

522 Wildwood Ave. | Jackson, Michigan 49201 Phone 517-841-2202 | Fax 517-789-8056 jpsk12.org

AUTHORIZED RELEASE OF INFORMATION

Student Name:	Date of Birth:
Parent/Guardian:	Phone:
Address:	City/State/Zip:
I hereby give permission for exchange of information bet	tween Jackson Public Schools and:
Name:	
Address:	
City/State/Zip:	
Phone:	Fax:
psychometric and psychiatric studies, speech, medical a include information pertaining to the areas indicated below () CA-60 Student File () OT/PT Report () Most Recent IEP/IFSP () Speech/La () Birth Certificate () Social/Dev () Immunizations () Social Work () Psychological Reports () Behavior F () Substance Abuse Reports () Court Rela () Early Childhood Reports () Health/Medicate Volume 41, no. 118, June 17, 1976, it is no long release records. School officials, include	ports () Psychiatric anguage Reports () Vision/Hearing Reports velopmental History () Academic/Educational Reports rk () Assistive Technology