

Shead High School
89 High Street Eastport, ME 04631
207-853-6254
207-853-2919 (f)

Bobbie Mitchell
Assistant Principal

Paul Theriault
Principal

Fawn Socobasin
Guidance Counselor

RECORDS RELEASE

I, _____, _____, _____
(surname/maiden name) (DOB) (year of graduation)

authorize you to release my _____ record from
(type of record/transcript, birth certificate, medical)

Shead High School, Eastport, Maine for use in the admission or employment
use. Please send records to:

(Institution/Organization Name)

(Address)

(City) (State) (Zip Code)

(Student Signature)

(Parental Signature if student is under 18 years old)

(Contact information/Address and Phone number)

Returned completed, signed form either via email to:

fsocobasin@shead.org

or

faxed to: Shead High School
(207) 853-2919