

Aiken County School District

1 B a n
A n 2

AUTHORIZATION FOR DISCLOSURE OF HEALTH INFORMATION

n ' cu n au z ' 'c 'u an u' n ua y n a a
n a n a' ' c n' ' n

USE AND DISCLOSURE INFORMATION:

u n a

uca na ' an acy Ac A an a c ' n a n a' 'c y a
n a n ' a ' n' n a c ' c u '
'a a a an a' ' c uca na ' n ' an 'c a ' c ' an a '
a a c ac y ' Au za n n n ' Au za n ay u n
' u n ana a ' c ' n uca na' n

APPROVAL:

a n ua an n a nau a

a n' u n _____