

State Records Scholarship Parental Consent For Publication Form

I	[Parent/Guardian Name] give my consent for
my minor	[Applicant Name] to participate in the State
Records scholarship contest and g	rant permission to have the minor's essay published on
StateRecords.org.	
on the Internet and will be available	pictures or videos published in the essay will be freely accessible e for the general public to see. The pictures, videos, and text , in print, and might also be translated into other languages or
By signing this form, the applicant i form will be submitted along with	s agreeing to apply for State Records scholarship. This consent the scholarship contest essay.
Applicant Signature	 Date
Applicant Printed Name	
IF YOU ARE UNDER 18 YEARS OF A BEHALF:	GE, YOUR PARENT/GAURDIAN MUST SIGN BELOW ON YOUR
regarding the State Records scholar	nor student named above. I have read this consent form rship contest and have reviewed the content of the minor's nsent for their essay to be submitted.
Parent/Guardian Signature	 Date
Parent/Guardian Printed Name	

Please keep this consent form in the minor's case files. A copy of the consent form is available for review, if needed, by the State Records Staff.