COLLEGE VISIT FORM

I plan to vis	sit				
College or	University on				
C	_	Day(s)	Date(s)	Year	
NUMBER	R OF ABSENC	CES THIS QUART	TER TO DATE:		
			ssed, I must make all neces work is to be turned in imr		
Student Signature		Date	Counselor Signatu	ure	Date
Parents: I u	inderstand the a	bove guidelines and	agree with the college visi	t date.	
Parent Signature Date		Date	_		
		<u>Te</u>	acher Signatures		
Period	1		5		
	2		6		
	3		7		
	4				
Return for	m to the Atter	ndance Office			
Approval of the Attendance Office				Date	

Procedure

- 1. Pick up College Visit Form from Guidance or Attendance Office.
- 2. Student and parent sign form.
- 3. Counselor signs form.
- 4. Teachers are notified and sign form.
- 5. Form is returned to attendance.