

College Visitation Form

STUDENT: _____ GRADE: _____

INSTITUTION: _____ VISITATION DATE: _____

PARENT'S APPROVAL & SIGNATURE: _____

SCHOOL COUNSELOR'S SIGNATURE: _____

PRINCIPAL'S SIGNATURE: _____

SIGNATURE OF COLLEGE ADMISSIONS OFFICE

TRANSPORTATION (Please Check)

My child may drive our auto: _____

My child may ride with another student: _____

STUDENT VISITATION TO HIGHER EDUCATIONAL INSTITUTIONS

There are occasions that these visitations are in the best interest of the student concerned. As a parent, you must approve of this absence from regular academic work.

The Guidance Office will check the validity of the students/parents request and indicate their approval by signing this form and returning it to the High School Office for further reference.

As a parent, please check if you approve of your child riding with another student or if you approve of your child's driving others to the visitation site.

This request form is in conformity with the Title IX Guidelines concerning sex discrimination;