

# COLLEGE VISIT FORM

\* **Must be approved by a School Administrator three days prior to the visit.**

NAME \_\_\_\_\_

I plan to visit \_\_\_\_\_ college/university on this date \_\_\_\_\_. I understand this privilege does not exclude me from any class requirements.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Student Signature

Date \_\_\_\_\_

Date \_\_\_\_\_

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College Counselor:

Logan Elm enforces a strict attendance policy. In order for this college visit to be an officially excused day we are requesting your signature for attendance verification.

Sincerely,

Tim Williams  
Principal

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Mr. Williams:

\_\_\_\_\_ did visit our campus today.

\_\_\_\_\_  
College Counselor Signature

Phone \_\_\_\_\_

Date \_\_\_\_\_