Student Name: _______________________________________

Date of College Visit: ________________________________

Name of College (s): ________________________________

Dates of school days student will be absent: _____________

Is this the first absence for a college visit this school year? ______ If this is not your first absence for a college visit, how many days have you missed previously for college visits?: _____________

________________________________________________________________________
Period 1 Class                                      Teacher Signature

________________________________________________________________________
Period 2 Class                                      Teacher Signature

________________________________________________________________________
Period 3 Class                                      Teacher Signature

________________________________________________________________________
Period 4 Class                                      Teacher Signature

________________________________________________________________________
Period 5 Class                                      Teacher Signature

________________________________________________________________________
Period 6 Class                                      Teacher Signature

________________________________________________________________________
Period 7 Class                                      Teacher Signature

________________________________________________________________________
Parent Signature                                     AP for Academics Signature