

# MERCY Academy

Student Name: \_\_\_\_\_

I plan to visit the campus of \_\_\_\_\_ College/University.  
I will inform my teachers the day prior to the visit and I understand that my transportation, conduct and safety are ultimately the responsibility of my parents and myself. I am allowed **one** such visit my junior year and **two** my senior year.

Mercy Senior Counselor Signature \_\_\_\_\_ (BEFORE VISIT)

\*\*College Admissions Counselor Signature \_\_\_\_\_ (DURING VISIT)

\*\*Appointment with college admission counselor on \_\_\_\_\_ (DATE) \_\_\_\_\_ (TIME)

RETURN THIS FORM TO MERCY SENIOR COUNSELOR AFTER VISIT FOR EXCUSED ABSENCE.

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## PARENTAL PERMISSION FOR COLLEGE CAMPUS VISIT

Date \_\_\_\_\_

My daughter \_\_\_\_\_ has my permission to visit

\_\_\_\_\_ College/University on \_\_\_\_\_ (DATE).

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

PLEASE RETURN THIS PORTION TO MERCY SENIOR COUNSELOR AT LEAST 1 WEEK PRIOR  
TO COLLEGE VISIT DAY. BE SURE TO READ THE COLLEGE VISIT POLICY BEFORE  
SCHEDULING YOUR DAY.