

**OLENTANGY ORANGE HIGH SCHOOL**  
**COLLEGE VISIT REQUEST FORM**

(For Juniors and Seniors only – maximum of three (3) days per year)

The purpose of a college visit is to get detailed information concerning a college a student may want to attend. Since choosing a college is such an important decision, it is advisable that parents attend all college visits with their child. Many colleges and universities host open houses on a Saturday for this purpose. The college open house format offers detailed information about the school, and there are usually additional staff and students on hand to answer questions. If the college you are considering does not offer this option, then a weekday visit may be necessary. Spontaneous visits to colleges are not recommended. If a visitation has not been scheduled, the college representative may not have time to meet with you.

In order to have a college visit be counted as an *excused absence*, this form requesting permission to make a college visit must be completed and submitted **PRIOR** to the visit. An administrator will review the form to determine whether it will be approved. If approved, the form will be returned to the student and must be completed by the appropriate college representative. Failure to have the form completed and/or returned to the approving administrator **PRIOR** to the visit will result in an *unexcused* absence. The absence can still be excused with a parent note within five (5) days and will count towards the three (3) college visits per year.

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date(s) Requested to Visit College: \_\_\_\_\_

College to Be Visited: \_\_\_\_\_

Address (City and State): \_\_\_\_\_

With whom did you make the appointment? Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone #: \_\_\_\_\_

Who will be attending the college visit with you? \_\_\_\_\_

If approved, I understand my child WILL BE ABSENT from school on the requested day and is doing so with my permission.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

H.S. Administrator's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

College Official's  
Name/Title: \_\_\_\_\_  
(Signature of College Official)

Date(s) of Visit: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**\*\*THIS FORM MUST BE RETURNED TO THE ATTENDANCE OFFICE WITHIN FIVE (5) DAYS OF THE ABSENCE(S) TO BE COUNTED AS AN EXCUSED ABSENCE.**