

COLLEGE VISIT PERMISSION

Student's Name: _____

Date(s) to be away from school: _____

College(s) to be visited:

Class Missed	Teacher	Teacher's Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Boarding Students:

Dorm/Evening Study Hall _____

Approval from Tim:
