



# HUTTO ISD

## **College Visit Request Form**

- At least two school days before your visit: Complete the form with all required signatures (teacher, assistant principal, parent).
- Take the signed form to your visit and have a college representative sign it.
- Submit the completed form to the attendance office upon return to have the visit excused.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Student ID # \_\_\_\_\_

College/University you are visiting: \_\_\_\_\_

Date of College Visit: From: \_\_\_\_\_ To: \_\_\_\_\_

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

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

### **THIS SECTION IS TO BE SIGNED BY EACH OF YOUR TEACHERS**

<u>Period</u>	<u>Subject</u>	<u>Teacher's Name</u>	<u>Teacher's Signature</u>
<u>1</u>			
<u>2</u>			
<u>3</u>			
<u>4</u>			
<u>5</u>			
<u>6</u>			
<u>7</u>			
<u>8</u>			
<u>9</u>			

Principal / Assistant Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **FOR COLLEGE/UNIVERSITY PERSONNEL ONLY**

I confirm that \_\_\_\_\_ visited \_\_\_\_\_ on \_\_\_\_\_.

Student Name

College/University Name

Date

\_\_\_\_\_  
College/University Personnel Signature

\_\_\_\_\_  
College/University Personnel Email Address