1015 East Brown Road Montpelier-OH 43543

Office 419-485-6700 ~ Principal 419-485-6703 ~ Fax 419-485-3487

Principal Su Thorp~**Guidance** Stephanie Friend~**AD** Joe Brigle~**Secretary** Yoli Saneholtz

Montpelier Schools

College Visitation Form

This form must be filled out and returned to the office no less than one day before your visit.

_____ will be visiting

Student Name

_____ on _____

Name of College or University Date

☐ I will be attending with a parent.

☐ I will NOT be attending with a parent.

_____ _____

Student Signature Date

_____ _____

Parent Signature Date

Have your teachers initial in the box below to signify that this date does not interfere with anything important and to remind you to get your classwork before you go.

Teacher Signatures

_____ _____

School Counselor Signature Date

During your visit, get documentation from the admissions office that provides proof that you were there. Turn that in the day you return from your visit. Failure to follow these steps will result in an unexcused absence.

Any failing grades or issues with excessive absences will void this opportunity.