LOUISVILLE HIGH SCHOOL: College/University Visit Request

1. Schedule your college visit online through the college/university admissions page.

2. Complete this page and have a parent/guardian sign at least 2 days before your visit.

3. Parent signature is required **BEFORE** administrator, school counselor, and Mrs. Hall (Attendance Office) sign.

4. Have your teachers sign-off by period on reverse side.

5. Take this form with you on your visit to have the college/university sign to verify your attendance.

6. After your visit, return this form by 8:00am to Mrs. Hall for an excused day out.

**Failure to complete and provide this form as documentation for a college/university visit may result as an unexcused absence.*

- **THIS FORM MUST BE COMPLETED A MINIMUM OF 2-DAYS BEFORE YOUR SCHEDULED VISIT.**

Student Name: _____

College/University: _____ Date(s): _____

Time of Scheduled Visit: _____

Parent/Guardian Signature: _____ Date of Request: _____

_____

The above section must be completed BEFORE obtaining school personnel signatures below.

LHS School Counselor (signature): _____

LHS Administrator (signature): _____

Attendance Office/Mrs. Hall (signature): _____

Teachers:

The student will be permitted to make-up work for the designated date(s), provided you are given adequate advance notification. Teachers, please sign/initial below if proper arrangements have been made with you for completing missed assignments.

Mod 1 _____

Mod 2 _____

Mod 3 _____

Mod 4 _____

Mod 5 _____

Mod 6 _____

Mod 7 _____

Mod 8 _____

(To be completed by college/university personnel)

STATEMENT OF VERIFICATION

I verify that _____

attended _____

on the following date(s) _____ at approximately _____(am/pm).

Signature of College/University Personnel: _____

Position: _____

Phone Number: _____