

College Day Request

Student Name: _____ Grade: _____

University/College to be visited: _____

Date of Visit: _____

College Day ___ of 2

The following regulations apply:

- 1) College days are requested by juniors and seniors only.
- 2) Students will take no more than 2 college days per year. These days will not count against attendance.
- 3) Students will make arrangements with all teachers regarding missed work.
- 4) Students will need each classroom teacher's signature to have request approved.

Period 1 _____ Period 7 _____

Period 2 _____ Period 8 _____

Period 3 _____ Period 9 _____

Period 4 _____ Period 10 _____

Period 5 _____

- 5) This form must be returned and approved by the guidance office at least one day prior to the college visit.

I have read the regulations and understand my responsibilities for using a college day.

Student Signature: _____

I have read the regulations and my child has permission to attend a college day.

Parent Signature: _____

Guidance Counselor Signature: _____

Date Request is Received: _____