



College/School Visitation Form

Important Note to Student

This form must be completed and returned to your counselor no later than three (3) days prior to your visit in order for this day to count as a "field trip day."

Student Name _____ Date _____

Place to be visited _____

Date of Visit _____ Time of Visit _____

Any student wishing to visit a college/school must:

1. Complete this request form
2. Bring a letter (on school/business letterhead) verifying your attendance of the visit.

Part A: To be completed by classroom teachers

Subject	Pass/Fail	Teacher Recommendation

Part B: To be completed by parent/guardian

I give permission to _____, my son/daughter, to participate in the above school/college visit. I understand that transportation is our responsibility.

Parent/Guardian Signature _____ Date _____

Part C: To be completed by guidance counselor

Counselor Signature _____ Date _____