



College Visit Form

Complete the information below, and obtain signatures from 1) a parent or guardian, 2) a college counselor and 3) your teachers **in that order**. Neither the college counselor nor the teachers can sign this form without a parent or guardian signature or phone call. As a Canterbury High School student, you are responsible for submitting all homework either before or immediately after your excused absence. **You must return this completed form to the administrative assistant in the High School Office at least two days before your intended visit.**

Your Name: _____ Date: _____

Date: _____ Day: _____ College: _____

Date: _____ Day: _____ College: _____

Number of College Visits to Date This Academic Year: _____

Signatures

1) I approve this college visit for my student.

Parent Signature: _____

Phone Call: _____

2) I **approve** **do not approve** this college visit for this student.

College Counselor Signature: _____

2) I understand the student listed above will be visiting a college(s) on the above date(s).

Period	Teacher	Assignment Due (Before/After)
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____