

COLLEGE VISIT FORM

Please immediately complete and return this form to the high school attendance office after a college visit and upon return to school. NOTE: A student's parent/guardian must call the school attendance office to report the absence prior to being absent. Anderson: 232-2772 * Turpin: 232-7770

Student Name:_____

College/University Name:_____

Date(s) of Visit:

SIGNATURES

I verify by my signature below that the above named student visited the above named college/university regarding possible admission on the date(s) listed above.

College/University Representative Signature:	Date:
--	-------

College/University Representative Printed Name: _____

College/University Representative Email Address: _____

College/University Representative Phone Number: _____

Parent Signature: _____ Date: _____

Rev. 9/27/22