



COLLEGE VISIT REQUEST FORM
Junior & Seniors Only

A request for a college visit is to be made **five school days in advance** of the desired absence. Juniors and seniors can visit three college/universities in a school year. (LMS Policy Manual § 4200.2).

Name of Student: _____ Grade: _____
(First and Last Name - No Nickname)

Please supply the following information:

College(s) you are planning to visit	Date of scheduled visit

***A letter of verification from the admissions office of each college visit must be submitted within 2 days upon return to school. Verification must be submitted in order for days to be excused.**

List names of adults who will be accompanying you on the college visit.

I verify that I have read and approve the above request.

(Parent or Guardian Signature)

(Date)

(Do not write below this line. **For office use only**)

Date Received in Office: _____

Number of days excused: _____

Number of days unexcused: _____

Comments:

Signature: _____