

SOUTHEAST OF SALINE COLLEGE VISIT **College Visit Prior Approval Form**

STUDENT'S NAME	GRADE
COLLEGE VISITING	
week (or more) prior to the 2. Assignments will be furn one day per day absent to 6 3. STUDENT MUST VERIFTHE ADMISSIONS DEPAF4. All college visit days take	thed upon return (or in advance if the teacher is able). Students will have complete and turn in assignments up to four days. 7 THE COLLEGE VISIT UPON RETURN WITH A SIGNATURE FROM
COLLEGE VISIT DAYS: Up to 3 days for Seniors and 2 the visits are preplanned through	days for Juniors will be excused for the purpose of visiting post-secondary institutions IF h the counseling center.
Return request form signed	by teacher, parent(s) and student to Mrs. Haden.
Date of college visit: Teacher's signature acknov	 ledging the dates of absentee:
Period 1	Period 5
Period 2	Period 6
Period 3	Period 7
Period 4	Period 8
Date form is completed/retu	ned:
Student's Signature:	
Attendance Secretary:	
Counselor Signature:	☐ Approved ☐ Denie