



# BEDFORD NORTH LAWRENCE HIGH SCHOOL

595 North Stars Boulevard  
Bedford, IN 47421  
(812) 279-9756 – FAX (812) 279-9304

## COLLEGE VISITATION REQUEST

Student \_\_\_\_\_ Date of Request \_\_\_\_\_

Grade \_\_\_\_\_

We, the parents/guardians, of the above named student have made arrangements to tour  
\_\_\_\_\_ campus located in \_\_\_\_\_,  
(College) (City)

\_\_\_\_\_ on \_\_\_\_\_, \_\_\_\_\_.  
(State) (Day(s) of Week) (Date)

\_\_\_\_\_  
Parent's Signature or Note attached

\_\_\_\_\_  
Counselor's Signature

\_\_\_\_\_  
Administrator's Signature

I understand it is my responsibility to obtain my assignments and return them prior to my college visit. **On my return to school, I must submit verification of my college visit** or my absence will remain unexcused.

Verification received \_\_\_\_\_ (Office use)

**Teachers:** A student is allowed two college visitation days during his/her senior year. In order for the day to be excused, this form must be completed and returned to the Attendance Office at least **\*five school days** prior to the requested college day.

**If this student is behind in your class, you may require all make-up work before signing.**

**Note:** Juniors may be granted a college day if the parents request so in writing to an administrator prior to carrying this request form. Juniors must be passing all classes to request an excused college visit.

- Period 1 \_\_\_\_\_
- Period 2 \_\_\_\_\_
- Period 3 \_\_\_\_\_
- Period 4 \_\_\_\_\_
- Period 5 \_\_\_\_\_
- Period 6 \_\_\_\_\_
- Period 7 \_\_\_\_\_
- Period 8 \_\_\_\_\_

\*Exception to normal policy has been approved by administration \_\_\_\_\_.  
Please see an administrator if you have questions concerning this college visitation form.