WHITEWATER HIGH SCHOOL POST-SECONDARY VISITATION FORM

| Student's Name | Grade |
|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| Name of College Visiting | Date of Visit |
| Guidelines: | |
| school year. Visits do NOT ro 2. This visitation form must be next school day you attend for step can result in an unexcus | F and ONLY if all guidelines are followed. |
| Signatures of Teachers (subs may sign mandatory. | if a teacher is absent) 3 days' prior notice is |
| 1 2 | 3 4 7 |
| 5 6 | 7 |
| CONFIRMATION OF Post-Secondary Visitation | |
| The undersigned person(s) acknowled institution on the date indicated above | ge that this student did visit the above named e. |
| SIGNATURE of College/University Official | Title of Official |
| PRINTED name of Official | Contact phone number of official |
| Student Signature | Parent Signature |

^{**} Visits are only approved on days that do not fall the day immediately before or immediately following a school holiday.

^{**} Visits requested after Spring Break must have principal approval **prior** to the visit.