

COLLEGE VISIT ADVANCED EXCUSE

Grant High School

Student Name _____ Event _____

Date of Event _____ Counselor Signature _____

Students – For permission to attend school related activity you must have all of your teachers complete the following form. A teacher’s signature validates that you are at an acceptable grade level and that you have made up your work in advance or have made arrangements to make up your work in a timely manner. Once teachers have completed the form, have your parents complete and sign the lower portion of the page. You must return this form to your activity advisor at least 48 HOURS IN ADVANCE of the activity. Also, ***you must bring in a note from the college showing that you were in attendance the day you were scheduled.***

Subject	Teacher’s Signature	Comments	Permission to Attend Activity	
			Yes	No

Parents

I _____ (parents name) have reviewed the above information and

_____ Do

_____ Do not

give _____ (students name) permission to attend the school related activity.

_____ Parents signature _____ Date _____