

COLLEGE VISIT PERMISSION FORM

Parent:

My son/daughter has permission to take a college day on _____ to visit _____ provided he/she signs out of classes and turns the sign-out sheet in to Mrs. Chvatal (**not the central office**) 3 days before the visit.

Signature of Parent/Guardian

Date

Student:

I have read and I understand the school policy pertaining to college visits that is outlined in the Bishop Neumann Student Handbook.

Student signature

Date

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