

# POSTSECONDARY VISIT



# PERMISSION SLIP

**Name:**

\_\_\_\_\_

You have a campus visit set up at: \_\_\_\_\_

**Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**Program of Study (Major):** \_\_\_\_\_

You will be meeting with:

- Admissions
- Financial Aid
- Advisor in your Program of Study
- Campus Tour/Residence Halls

Number (at the university or institution) to call if plans change: \_\_\_\_\_

Take a notebook/pen in order to write things/names/etc. down.

Have food with you (i.e. granola bars, etc. in case you don't have time to eat).

Soak up all the information and have fun!!

Mrs. Eilert

**Parent's Name (Printed):** \_\_\_\_\_

**Parent's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\*\*\*This form MUST be turned into Mrs. Eilert at least 24 hours prior to the visit in order for the visit to be excused. Thank you!