Personalized Campus Visit Permission Slip

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

On: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

At: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program of Study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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!