

COLLEGE/UNIVERSITY VISITATION FORM for CLINTON-MASSIE HIGH SCHOOL
2556 Lebanon Road – Clarksville, OH 45113
937-289-2109 FAX 937-289-7019

Principal – Barrett Swope Ex. 2402

Donna Potts Ex. 2406

The Student:

- Must have the visit cleared with the College/University, a parent, all teachers and the CMHS Guidance Office at least one week in advance.
- Must get all signatures below and bring the form back to Mrs. Potts before the day of the visit.
- Will then be given a copy to take on the actual visit. The copy must be signed, dated & stamped by the College/University Official.
- Give Mrs. Fairchild the completed form upon returning to CMHS in order to earn a non-absence (within 48 hours of returning to school)

**See the Student Handbook for Complete visitation guidelines WWW.clinton-massie.k12.oh.us
Student is accountable for obtaining and completing any missed assignments

STUDENT _____ DATE OF VISIT _____

COLLEGE/UNIVERSITY _____

OFFICIAL SIGNATURE/STAMP _____

TEACHERS SIGNATURES by Period or Block

1st _____

_____/_____
Counselor Signature/Date

2nd _____

3rd _____

_____/_____
Parent Signature/Date

4th _____

5th _____

_____/_____
Student Signature/Date

6th _____

7th _____

_____/_____
Principal Signature

8th _____

Needed for Special Circumstances Only
(such as extra days or extended time)