COLLEGE/UNIVERSITY VISITATION FORM

Student’s Name ____________________________________________________________

Date of Visit ______________________________________________________________

Principal’s Signature ______________________________________________________

NAME AND LOCATION OF COLLEGE/UNIVERSITY

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

__________________________________  _____________________________

College/University Official’s Signature                                      Title

College/University Telephone Number   ______________________________________

• This form is to be picked up from the office by the student before the college visit.
• The student is responsible for completing this form and acquiring the proper signatures.
• Students are expected to write a one page three part summary of their college/university visit experience (what they learned, the entrance requirements and their career goals and the steps they need to take at PFHS to meet these goals) to be turned in within 3 days with signature sheet.