

Hahnville High School
College Visitation Form

Date of Request: _____

Date of Visit: _____

Student: _____

Name of Institution: _____

Purpose of Request:

- _____ College Visit
- _____ Armed Forces
- _____ Placement/Testing

In the absence of a Hahnville High School faculty representative, I will exhibit appropriate behavior at the above institution. That is, I will behave in an orderly and courteous manner.

Student Signature

I understand that Hahnville High School and/or the St. Charles Parish School system is not responsible during this visitation and hereby release them from all liabilities as a result of the visitation.

Parent Signature

Date

_____ participated in the aforementioned activity.

College Representative

Date