

ROSLYN HIGH SCHOOL
475 Round Hill Road
Roslyn Heights, NY 11577
Counseling Center

REQUEST FOR EXCUSED ABSENCE
FOR COLLEGE VISITATION

To: Dr. Scott Andrews, Principal

Date: _____

Student: _____

I have arranged for a visitation/interview with the following college/s:

Name of College

Date of Visitation

I am requesting that the above date be approved as an excused absence. I understand that up to four (4) days total during the spring of the junior and senior years can be used for college visitations and will not be charged against my required attendance. *I also understand that the college must verify my visit in order for me to qualify for the excused absence.*

Signature of Parent

Signature of College Official

Signature of Student

Position of College Official

Date

Phone