

College Day Form

Argyle High School
800 Eagle Dr
Argyle, TX 76226

_____ has permission to visit
Student Name:

_____ on _____
Name of College or University (List dates to be out)

In pursuit of degree plan counseling and/or financial aid advising.

High School Counselor Signature

Date Approved

Parent Approval Signature

Date Approved

High School Principal Signature

Date Approved

Signature and Title of College Official

Date Approved

Senior students will be approved two days to visit a college or university provided they are in good standing with attendance and grades. Students are responsible for making prior arrangements in regard to school assignments.