



# Ludlow High School

Mr. Travis Caudill, Principal  
Mr. Steve Hart, Assistant Principal  
Mrs. Pam Johnson, Guidance Counselor

515 Elm Street  
Ludlow, Kentucky 41016  
Phone: 859/261-8211 • Fax: 859/655-7536

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## COLLEGE VISIT REQUEST

As a parent/guardian of Ludlow High School student, \_\_\_\_\_,  
Student's Name

I request that my son/daughter be excused from attending classes on \_\_\_\_\_  
Date

in order for him/her to visit \_\_\_\_\_.  
College/Program's Name

The purpose of this visit is to tour the school, meet with officials and students, and gain information that will help my son/daughter in deciding post-graduation goals. I understand that this visit is my responsibility to organize and implement, and that Ludlow High School is not sponsoring this trip.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

**A request to visit a college/school must be submitted to the Guidance Counselor, Principal, or Assistant Principal PRIOR to the day of the visit. The student will be notified regarding the status of his/her request. If permission is granted, the student should pick up a "Visit Verification" form to bring back to LHS after the visit.**

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-- This portion is to be completed by a School Administrator --

The above student **does** / **does not** have permission to be absent from school for this visit.

\_\_\_\_\_  
Ludlow High School Administrator Signature

\_\_\_\_\_  
Date