

COLLEGE VISITATION DAY

Wednesday, October 12, 2011, will be Testing Day at Central Catholic. Underclass students will be taking standardized tests such as the PSAT, PLAN and EXPLORE tests. Seniors will have an opportunity to visit a college campus. **Seniors must submit their College Visitation Permission Slip in writing by Monday, October 10, with parental approval.**

Any seniors choosing not to visit a college will report to school for Central Catholic's College Day which will be held in the Sullivan Center from 8:00 a.m. to 12:30 p.m. ***Parents are also invited to attend this College Day.*** Here are the names of some of the schools that will be in attendance: The University of Toledo, Bowling Green State University, Lourdes University, Owens Community College and more.

Those seniors who wish to take advantage of a campus visit opportunity must complete the College Visitation Permission Slip below and submit it to the Guidance Office in Room 107. You may attend the University of your choice. Here are some phone numbers of area universities for your convenience.

	<u>Admissions Office</u>
John Carroll University	(216) 397-4294
University of Dayton	(800) 837-7433
The Ohio State University	(614) 292-3980
Bowling Green State University	(419) 372-2531
Owens Community College	(567) 661-7777
Lourdes College	(800) 878-3210
The University of Toledo	(800) 586-5336
Eastern Michigan University	(734) 487-3060 or 800-GO-TO-EMU
Tiffin University	(800) 968-6446 ext. 3301

Please indicate your choice below.

COLLEGE VISITATION PERMISSION SLIP

_____ **October 12, 2011**
Name of College/University Visiting Date

I give my student, _____, permission to visit a college campus. I will provide transportation for the campus visit or allow my child to travel with another student and/or parent. I understand that I may choose to send my student to school on that day if I wish to do so.

_____ **We choose a campus visit.**

_____ **We prefer our student to attend CCHS for College Day.**

_____ Parent/Guardian Signature

_____ Student Signature

_____ Date

*Central Catholic High School
2550 Cherry Street
Toledo, Ohio 43608*

Phone: 419-255-2280

FAX: 419-259-2848

(This must be completed and signed by a representative from the college/university you attended.)

COLLEGE VISITATION VERIFICATION FORM

Please verify the attendance of _____,

(Student's Name)

a student from Central Catholic High School, at _____,

(College/University)

on Wednesday, October 12, 2011.

Thank you very much for helping us to provide an opportunity for our seniors to visit your campus.

Name

Position

College/University

(This "Student Verification" form must be turned into the Guidance Office by Friday, October 14th.)