

An Equal Opportunity Employer

Upsala Area Schools
Independent School District No. 487
415 South Main Street
Upsala, MN 56388
320-573-2176

Post Secondary Campus Visit Form

Student's Name: _____

Campus Intended to Visit: _____

Date & Time Intending to Visit: _____

Academic/Vocational Program Observing: _____

It is your responsibility to notify the School Office and the College if you do not keep your scheduled appointment!

(Upsala Office Administration Signature)

(Date)

(Parent Signature)

(Date)

(College Admissions Officer's Signature)

(Date)

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