

**LAKE-LEHMAN JUNIOR-SENIOR HIGH SCHOOL**  
**P.O. BOX 38**  
**Lehman, PA 18627-0038**

Attendance Office

(570) 675-7458  
Fax (570) 674-2951

**College Visit Verification Notice**

Date \_\_\_\_\_

This is to certify that the student listed below was visiting our campus on \_\_\_\_\_.  
Date

Student Name \_\_\_\_\_

College Name \_\_\_\_\_

Time of Appointment \_\_\_\_\_

College Official Name \_\_\_\_\_

Signature or Stamp \_\_\_\_\_

Thank You.

**For Office Use**  
This is visit # \_\_\_\_\_  
of 5 excused college visits