



STATE TECHNICAL COLLEGE
OF MISSOURI

High School Attendance Record Form

Student Name: _____ High School: _____
 First Middle Last

The High School Counselor must complete the information below:

Please record the **number of days** absent each academic school year. State Tech does not accept attendance print-outs in place of this form.

9th Grade _____ 10th Grade _____ 11th Grade _____ 12th Grade _____

Comments/Explanation of Excessive Absences: _____

Signature of High School Counselor Phone Date

Return completed form to:
State Technical College of Missouri
Office of Admissions | One Technology Drive | Linn, MO 65051
FAX: 573-897-5026
EMAIL: admissions@statetechmo.edu