Campus Tour Request Form

First Name: __________________________
Last Name: __________________________
Street address: _______________________
City: ________________________________
State: _______________________________
ZIP or Postal Code: ___________________
Country: _____________________________
Work Phone Number: ___________________
Mobile: ______________________________
Fax Number: __________________________
Email address: _________________________

Academic area of Interest: ____________________________

Grade Level: ____________________________
Age Range: _____________________________
Group Visit: ______ Individual Visit: ______
Number of Visitors: ______ Number of Chaperones:____

I would like to arrange (check all that apply):

_____ A campus tour
_____ A lunch on campus ($ 6 per person)
_____ A meeting with an academic department
_____ A classroom visit

Preferred visit dates: ____________________________
Preferred visit time: _____________________________
Completed by: _________________________________
Date completed: _______________________________
Questions or Comments: _________________________

Mail to: Office of Recruitment & Admission
4200 Connecticut Avenue, NW
Bldg 39 Room A09 K
Washington, DC 20008