SITE VISIT DATES REQUEST AND LODGING RECOMMENDATION FORM

Please fill in the information below and return to the Executive Office no later than 14 days.

CoARC Program ID#: ______
Institution name: ______
City: ______  State: ______  Zip: ______

Convenient Airport(s): ______
Distance from Airport(s) to Campus (one-way, in miles): ______

Name of Primary Contact for Program: ______
Position: ______
Email: ______
Work Phone: ______
In case of emergency or abrupt change in travel plans, please call: ______

Provide dates below for either Monday/Tuesday or Thursday/Friday that are at least 3 months upon receipt of this form, but that are not more than 5 months. Key Personnel and 1st and 2nd year students are required to be present for at least a portion of the visit (see site visit agenda). For example, if you received this form on July 15, then the dates would be from October 15 through November 15.

Site Visit dates (MM/DD/YYYY) - 1st choice: ______/_____/_______
Site Visit dates (MM/DD/YYYY)- 2nd choice: ______/_____/_______
Site Visit dates (MM/DD/YYYY)- 3rd choice: ______/_____/_______
Site Visit dates (MM/DD/YYYY)- 4th choice: ______/_____/_______

Also, provide three recommendations for a suitable hotel. It should be economical, but clean and safe. There should be a restaurant either in the hotel or within walking distance, if possible. Note: The Team Captain will make hotel reservations with assistance from the Program Director.

<table>
<thead>
<tr>
<th>Hotel Name, Address, Phone #, and website URL</th>
<th>Distance from Program (one-way in miles)</th>
<th>AAA rating</th>
<th>Room Cost/night</th>
<th>Has Restaurant? (Y or N)</th>
<th>Shuttle Service (Y or N)</th>
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If there are any questions, please contact Bonnie Marrs at the Executive Office at (817) 283-2835.