CLASSROOM VISIT PROGRAM
Request form for Teachers - Faculty - Community Organizations

For K-12 teachers, SCSU faculty, and community organizations interested in inviting SCSU international students to visit their classrooms or organizations. Please print clearly:

Contact Information:

Last Name: ____________________________    First Name ____________________________

Phone: (work) ____________________________ (cell) ____________________________

E-mail: ______________________________________

School/Organization Name: ___________________________________________________________

Address or Campus Location: _______________________________________________________

Number of students in class: ____________________________    Grade/Course Level: ____________________________

Age range of students in class: ____________________________    Number of speakers/presenters requested: ____________________________

Identify particular country/region(s), topics, or program areas you would like student speakers to address:

________________________________________________________

Specify time frame (month, day, time) when you would like speakers to visit your class:

________________________________________________________

Briefly describe what you hope to gain by participating in the Classroom Visit Program:

________________________________________________________

Is your school/organization able to provide transportation?    Yes _____    No _____

If needed, is your school/organization able to provide:    Laptop/projector _____    Wireless internet _____

Preferred contact method:    E-mail _____    Work phone _____    Cell phone _____

Thank you for your interest in the Classroom Visit Program!

Please return form by fax, mail, or email to:

Center for Int'l Studies, Lawrence Hall 101, Saint Cloud State University, 720 4th Avenue South, Saint Cloud, MN 56301
Tel: 1-320-308-4287 - Fax: 320-308-4223 - Email: isss@stcloudstate.edu