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ty(s) visit	ing:			
N	ame	Title	Office/Department	Email
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			Purpose	
Date	Time	Faculty/Representativ	ve Purpose	
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in ______(country) and neeting with your institution. We thank you in advance for your consideration.

Language ability of delegates:
A/V & media requests:
Hotel information:
Airline information:
Ground transportation information:

SECTION B:

Please assist us by filling out the following. We appreciate your assistance in organizing this meeting.

MEETING DETAILS
Confirmed date:
Confirmed time:
Location: (address of meeting location)
Confirmed attendees:
Agenda:
Are there specific objectives for the meeting(s)?
Institution/Org contact:
Email:
Phone:
Cell:
Other: Note: Please let us know if you have any other recommendations for our visit (transportation times, best methods of transportation, maps, etc.)