

Off-Campus Short Term Course: Contacts and Itinerary
(Leave Copy with the Off-Campus Study Office, 124 Roger Williams Hall)

Faculty leader: _____ Date: _____

Course number and name: _____

Dates of travel off-campus: _____

General contact information while off-campus:

Cell phone, if any: _____ Email other than Bates, if any: _____

Contact information of spouse/partner in US, if any:

Name & relationship _____, Telephone _____

Other faculty accompanying the course, if any: _____

General contact information while off-campus:

Cell phone, if any: _____ Email, other than Bates, if any _____

Contact information of spouse/partner in US, if any:

Name & relationship _____, Telephone _____

Organizational base off-campus, if any: name, key contacts, telephone, email, etc

Itinerary (Please adapt as appropriate. If based at one or a few locations, just make one entry per location with the dates there. If more convenient, attach your own records with this information. Use reverse side as needed.)

Start of day location and dates

*Example: May 5. Fly to Rome, 7:00 pm
United Flight 123 from Boston.
Arrive at 6:00. Jim Smith flying
separately, meeting group in Rome
Tickets arranged through Sunshine Travel
Tel: xxx-xxx-xxxx*

End of day location with contact info

*Hotel Tiber, tel: 011-39-6-575-7144
Piazza Santo 123, no fax
A-44578 Rome
Based here until May 12*