GROUP VISIT REQUEST

Name of group: ________________________________________________

Name of school or organization: ____________________________________

Group Information:
Size (max is 30): __________
Ages/grade of group (10th grade and above): __________

Contact person: ________________________________________________
Contact email: ________________________________________________
Contact phone: ________________________________________________

Group visit options:
1st Wednesdays  Arrive 9:30am  Depart 11:00am
2nd Thursdays  Arrive 12:00pm  Depart 1:30pm

Visit Month and Date preference:  1st __________  2nd __________

- Group visits are offered on Wednesdays and Thursdays
- Typical visits will last 1-1 ½ hours
- Please notify us three weeks in advance to accommodate your preferences

The group visit will include an information session and campus tour.

Any additional requests your group may have? (Special accommodations, etc.)
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Thank you for your interest in Dakota County Technical College. Please complete and return this request form and a signed copy of the Group Visit Expectations form to admissions@dctc.edu to confirm your reservation. Dakota County Technical College will send you a confirmation for your group visit. If you have questions about your visit request, please contact Admissions at admissions@dctc.edu.

Admissions Use Only

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<thead>
<tr>
<th>Admissions Use Only</th>
<th>Names of Tour Guides</th>
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<tbody>
<tr>
<td>Date request submitted: ________________________________</td>
<td>____________________</td>
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<tr>
<td>Date Tour Guides assigned &amp; confirmed: ___________________</td>
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<td>Room Reserved by: _______ Room #: __________</td>
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<td>Date JIRA submitted for room set-up: ____________________</td>
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<td>Date confirmation sent: __________ by: __________</td>
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<td>Other information or details: ___________________________</td>
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Dakota County Technical College, 1300 145th St. E. Rosemount, MN 55068

651-423-8300 admissions@dctc.edu www.dctc.edu
DCTC Group Visit Expectations

The Admissions Office and our Student Ambassadors are excited to host your group on our campus. To ensure that your visit is a fun, productive, and information experience, please review these expectations with your chaperones and students before you arrive on campus.

Arrival:

- It is very important that your group arrives on campus as scheduled. If you are running late, please notify your contact person or the Enrollment Services Office at 651-423-8300 so that schedules can be adjusted accordingly.
- Please plan to arrive 10 minutes early to allow enough time for parking and check-in.
- If anyone in your group needs special accommodations, please notify us at least two weeks prior to your visit.

Chaperones:

- Our expectation is that you will bring 1 chaperone for every 10 students. Chaperones must stay with the students at all times during the visit.
- Chaperones are expected to cover the expectations and appropriate behaviors with students prior to the visit.
- Each chaperone must serve as a positive role model for the students and enforce campus rules. If there is a problem or inappropriate behavior, chaperones must take corrective actions immediately.

Students:

- All students must follow campus rules and show respect for the Dakota County Technical College campus. Failure to do so may result in the visit ending early.
- All students must be respectful to all DCTC employees, speakers, and tour guides.
- All students are expected to put away any electronic devices and turn off cell phones. This includes devices such as iPods and headphones/ear-buds.
- We expect that all students will wear appropriate clothing for the visit.

Dakota County Technical College looks forward to welcoming your group on our campus. We hope this visit will inspire your students to pursue a post-secondary education at DCTC.

By signing below, you have agreed to the rules and expectations set by DCTC and shared them with your chaperones and students before arriving on campus.

Electronic Signature: ______________________________ Date: ________________

THANK YOU FOR YOUR COOPERATION!