

MORRIS COLLEGE
OFFICE OF ADMISSIONS AND RECORDS
100 WEST COLLEGE STREET
SUMTER, SOUTH CAROLINA 29150-3599, Fax (803) 773-8241

Campus Visitation Request Form
(Please Print)

Date: _____

Name of contact person: _____

Telephone number: Work (____) ____ - _____, Fax (____) ____ - _____, Cell (____) ____ - _____

Home (____) ____ - _____, Alternate Cell (____) ____ - _____, Alternate Cell (____) ____ - _____

Mailing Address: _____ City/State _____ Zip Code _____

DATE OF VISIT

1. 1ST Choice: Arrival time and date: _____

2nd Choice: Arrival time and date: _____

TOUR GROUP INFORMATION

Total number of people in group: ____ Adults: ____ Seniors (High School) _____

Juniors (High School) ____ Sophomores (High School) ____ Freshmen (High School) _____

2. What type of accommodations will your group need?

Meals, check one: Breakfast _____ Lunch _____ Dinner _____ Refreshments _____

Meet with Admissions Staff: Yes ____ No ____ Financial Aid Staff: Yes ____ No ____

Other areas of interest: _____

NOTE: *Tour groups that arrive later than 1 hour of scheduled time cannot be guaranteed planned program or meal.*

DO NOT WRITE BELOW THIS BLOCK

Dear Sir/Madame: Your visit has been confirmed for campus visitation with Morris College. We will expect you and your party of _____ to arrive on _____ at _____ and depart on _____ at _____. While you are here, the services that you request will be provided. Accommodations for _____ meals will be provided. Your Morris College point of contact is: _____

Point of contact's signature

White: Requester

Canary: Registrar/Recruiter