

**Individual Site Visit  
Questionnaire and Request Form**

Name:

Title:

College/University:

Email:

Telephone:

**To help us understand your objectives and plan an appropriate schedule for your visit, please respond to the following questions.**

Which SIT Study Abroad program(s) would you like to visit?

On what date(s) would you like to visit, and for how long? We prefer at least one month's advance notice. (Please note that visits may not be feasible on weekends or local holidays)

Describe your objectives in visiting the program(s). Be as specific as possible considering thematic seminar, language classes, homestays, research or internship sites, etc.

Describe your knowledge of & previous experience in this country/region (include language proficiency)

**School for International Training**

1 Kipling Road, PO Box 676  
Brattleboro, VT 05302-0676 USA  
P: 802 258-3112  
F: 802 258-3110

studyabroad@sit.edu  
**studyabroad.sit.edu**

Will you be visiting other programs or participating in other activities during this trip? If so, please briefly describe them, including dates if available.

To help with your introduction to our program staff, please provide a link to your bio on your school's webpage.

Please describe your school's history with SIT study abroad programs in general and with the specific programs you would like to visit.

Upon your return we request a report of your visit including how it went, whether it met your objectives, and any recommendations you may have. Please also consider how this visit contributed to your knowledge of SIT and ways you might share what you learned with colleagues and students.

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To indicate your agreement please sign and return this form to Amanda Staton at [ProgramVisits@sit.edu](mailto:ProgramVisits@sit.edu).

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Signature

Today's Date

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