



## College Visit Form Juniors and Seniors

Student Name: \_\_\_\_\_ Date \_\_\_\_\_

College: \_\_\_\_\_

Appointment Date and Time: \_\_\_\_\_

Admissions Contact Person: \_\_\_\_\_

Admissions Signature: \_\_\_\_\_

*Complete the following and return to the high school front desk.*

Ratings: 1 = poor 5 = excellent

**Academics:**

Strength of program areas	1	2	3	4	5
Level of overall academic challenge	1	2	3	4	5
Quality of faculty	1	2	3	4	5
Support Services (tutoring, counseling, career placement)	1	2	3	4	5

COMMENTS:

(see reverse)



**Campus Life:**

Residence Halls	1	2	3	4	5
Dining Options	1	2	3	4	5
Safety	1	2	3	4	5
Transportation	1	2	3	4	5
Student Center	1	2	3	4	5
Library					

COMMENTS:

**Campus Activities**

Social organizations	1	2	3	4	5	
Sports		1	2	3	4	5
Opportunities for music and theater	1	2	3	4	5	
Religious organizations		1	2	3	4	5
Fitness center		1	2	3	4	5

COMMENTS:

**Campus Appeal**

First impressions	1	2	3	4	5
Classrooms	1	2	3	4	5
Technology	1	2	3	4	5
Surrounding Area	1	2	3	4	5

COMMENTS: