Cornell Compliance

OFFICIAL VISIT REQUEST FORM

SPORT_____ COACH_____

Name of PSA_____

Home Address_____

PSA E-mail_____ Parent Email_____

Name of High School_____

PSA's Eligibility Center 10-digit ID Number _____

	Yes	No	Date
Financial Aid Pre-Read	_____	_____	_____
ECR	_____	_____	_____
Test Score & Transcript	_____	_____	_____

Arrive on Campus (Date & Time) _____ Depart Campus (Date & Time) _____

Have you confirmed that the above dates do ***NOT*** fall during a DEAD period? Yes
(YOU *MUST* DO THIS BEFORE SUBMITTING THIS REQUEST)

Mode of Transportation _____ Parents Accompanying? Yes_____ No_____

Student Host _____ Phone_____

Meal Tickets (#) _____ Complimentary Event Tickets (#)_____ Event_____

Expenditures (estimates)

Travel $_____

Lodging $_____

Meals $_____

Host $_____ TOTAL COST $_____

FOR COMPLIANCE USE ONLY

Activated _____ Emailed _____ Database _____ Expense Report Received _____ Checked for Dead Period _____ Notified Coach of Approval _____

Last Updated 07/26/2011